Audits – Bay & Central Region 1515 Clay Street, Suite 1109, Oakland, CA 94612 (510) 622-2584, FAX (510) 622-2585

January 26, 2009

Donna Wigand, LCSW Director Contra Costa County Mental Health 1340 Arnold Drive, Suite 200 Martinez, CA 94553

Dear Ms. Wigand:

#### AUDIT REPORT – CONTRA COSTA COUNTY MENTAL HEALTH SERVICES

We have examined the Short-Doyle/Medi-Cal Cost Reporting and Data Collection (CR/DC) report of Contra Costa County Mental Health Services for the fiscal period July 1, 2003 to June 30, 2004. Our examination was made in accordance with Section 14170 of the Welfare and Institutions Code and included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

In our opinion, the amount shown in the accompanying Summary of Net Federal Share of Federal Short-Doyle/Medi-Cal Program Costs and EPSDT SGF (Schedule 1) represents the actual net program costs allowable under the above-mentioned statutes.

The effect of this revised allowable program costs is as follows:

#### **Net Program Costs**

	Settled	Allowed	<u>Adjustment</u>
Federal Share of Short-Doyle/Medi-Cal	\$30,610,031	\$29,354,948	\$(1,255,083)
Federal Share of Healthy Families	\$ 492,469	\$ 379,490	\$ (112,979)
State General Funds EPSDT Due State	\$ 9,933,835	\$ 9,877,726	\$ (56,109)

Donna Wigand, LCSW, Director January 26, 2009 Page 2

If you disagree with any of the results of this audit you may request an informal appeal conference. This request must be in writing and received by the Department of Health Services within sixty (60) calendar days following the date of receipt of this report. Your notice of disagreement should be directed to John Melton, Acting Chief, Administrative Appeals, Office of Legal Services, Department of Health Services, 1029 J Street, Suite 200, Sacramento, California 95814, and be in conformance with provisions of Sections 51016 and sequence, Title 22, of the California Code of Regulations.

Sincerely,

WALTER J. HILL, JR., MBA, EA

Chief of Audits

MABEL GILTNER, Supervisor Audits – Bay & Central Region

**Enclosures** 

**CERTIFIED MAIL** 

## CONTRA COSTA COUNTY COMMUNITY MENTAL HEALTH SERVICES SUMMARY OF NET REIMBURSABLE MEDI-CAL PROGRAM COSTS FISCAL YEAR ENDED JUNE 30, 2004

					Audit	
		_	As Settled		Adjustments	As Audited
NET REIMBURSABLE MEDI-CAL						
PROGRAM COSTS						
COUNTY PROVIDERS						
MEDI-CAL - FFP	(Sch. 2a)	\$	19,790,826	\$	(859,157) \$	18,931,669
HEALTHY FAMILIES - FFP	(Sch. 2a)	_	305,872_		(83,273)	222,599
TOTAL FFP - COUNTY PROVIDERS		\$ _	20,096,698	\$	(942,430) \$	19,154,269
CONTRACT PROVIDERS		_				
MEDI-CAL - FFP	(Sch. 3b)	\$	. , , .	\$	(395,926) \$	10,423,279
HEALTHY FAMILIES - FFP	(Sch. 3b)	_ =	186,597		(29,706)	156,891
TOTAL FFP - CONTRACT PROVIDERS		\$ _	11,005,802	\$_	(425,632) \$	10,580,170
TOTAL FEB. COUNTY BLUE CONTRACT	DROVICERS					
TOTAL FFP - COUNTY PLUS CONTRACT MEDI-CAL - FFP	PROVIDERS	\$	30,610,031	s	(1,255,083) \$	29,354,948
HEALTHY FAMILIES - FFP		J	492,469	Þ	(1,233,083) 3	379,490
	DD OMDED C	<u>-</u>		_		
TOTAL FFP - COUNTY PLUS CONTRACT	PROVIDERS		31,102,500	\$_	(1,368,062) \$	29,734,439
SUMMARY OF STATE GENERAL FUNDS						
EPSDT - SGF	(Sch. 4)	\$	9,933,835	\$	(56,109) \$	9.877,726
2.021 001	(501. 1)	Ψ_	7,755,055	* —	(20,107)	

# CONTRA COSTA COUNTY COMMUNITY MENTAL HEALTH SERVICES SUMMARY OF MEDI-CAL PROGRAM COSTS BY MODE OF SERVICE FISCAL YEAR ENDED JUNE 30, 2004

#### COUNTY OPERATED FEDERAL

<u> </u>	JNTY OPERATED FEDERAL			As Settled		Audit Adjustments	As Audited
Tota	ıl Medi-Cal Gross Reimbursement						
1.	Inpatient SD/MC and Crossover	(MH 1968, Ln 11, 11A)	\$	7,071,967	\$	121,990 \$	7,193,956
2.	Outpatient SD/MC and Crossover	(MH 1968, Ln 11, 11A)		21,099,142		(52,184)	21,046,958
3.	Enhanced SD/MC (Children) - I/P	(MH1968, Ln 16, 16A)		0		0	0
4.	Enhanced SD/MC (Children) - O/P	(MH1968, Ln 16, 16A)		392,290		55,145	447,435
5.	Enhanced SD/MC (Refugees) - I/P	(MH1968, Ln 22)		0		0	0
6.	Enhanced SD/MC (Refugees) - O/P	(MH1968, Ln 22)		0		0	0
7.	Healthy Families Gross Reimbursement-I/P	(MH1968, Ln 27, 27A)		0		0	0
8.	Healthy Families Gross Reimbursement-O/P	(MH1968, Ln 27, 27A)		401,695	_	(116,465)	285,230
9.	Total		\$_	28,965,094	\$_	8,485 \$	28,973,579
Les	s: Patient & Other Payor Revenues						
10.	Inpatient SD/MC and Crossover	(MH 1968, Ln 28, 28A)	\$	139,003	\$	1,558,019 \$	1,697,022
11.	Outpatient SD/MC and Crossover	(MH 1968, Ln 28, 28A)		0		67,103	67,103
12.	Enhanced SD/MC (Children)-I/P	(MH 1968, Ln 29)		0		0	0
13.	Enhanced SD/MC (Children)-O/P	(MH 1968, Ln 29)		0		0	0
14.	Enhanced SD/MC (Refugees) - 1/P	(MH1968, Ln 30)		0		0	0
15.	Enhanced SD/MC (Refugees) - O/P	(MH1968, Ln 30)		0		0	0
16.	Healthy Families Patient Revenue-I/P	(MH 1968, Ln 31)		0		0	0
17.	Healthy Families Patient Revenue-O/P	(MH 1968, Ln 31)		0		0	0
18.	Total		\$ =	139,003	\$ _	1,625,122 \$	1,764,125
Me	di-Cal Net Reimbursement for Direct Services						
19.	Inpatient SD/MC (Incl Children Enhanced)	(Ln 1,3 - Ln 10,12)	\$	6,932,964	\$	(1,436,029) \$	5,496,934
20.	Outpatient SD/MC (Incl Children Enhanced)	(Ln 2,4 - Ln 11,13)		21,491,432		(64,142)	21,427,289
21.	Enhanced SD/MC (Refugees)-I/P	(Ln 5 - Ln 14)		0		0	0
22.	Enhanced SD/MC (Refugees)-O/P	(Ln 6 - Ln 15)		0		0	0
23.	Healthy Families-I/P	(Ln 7 - Ln 16)		0		0	0
24.	Healthy Families-O/P	(Ln 8 - Ln 17)		401,695		(116,465)	285,230
25.	Total		\$ =	28,826,091	\$ _	(1,616,637) \$	27,209,454
Me	di-Cal MAA Reimbursement						
26.	Service Functions 01-09	(MH1979, Ln 11, Col. A)	\$	99,203	\$	(1,047) \$	98,156
27.	Service Functions 11-19, 31-39	(MH1979, Ln 12, Col. A)		308,787		(98,372)	210,414
28.	Service Functions 21-19	(MH1979, Ln 13, Col. A)		274,619		(9,228)	265,392
	Total		_	682,609	- s	(108,647) \$	573,962

# CONTRA COSTA COUNTY COMMUNITY MENTAL HEALTH SERVICES SUMMARY OF MEDI-CAL PROGRAM COSTS BY MODE OF SERVICE FISCAL YEAR ENDED JUNE 30, 2004

COUNTY OPERATED FEDERAL					Audit	
			As Settled		Adjustments	As Audited
Amount Negotiated Rates Exceed Cost						
30. Inpatient SD/MC (Incl Children Enhan)	(MH 1968, Ln 38, 38A)	\$	0	\$	0 \$	0
31. Outpatient SD/MC (Incl Children Enhan)	(MH 1968, Ln 38, 38A)		0		0	0
32. Enhanced SD/MC (Refugees)-I/P	(MH1968, Ln 39)		O		0	0
33. Enhanced SD/MC (Refugees)-O/P	(MH1968, Ln 39)		0		0	0
34. Healthy Families-I/P	(MH 1968, Ln 40, 40A)		0		0	0
35. Healthy Families-O/P	(MH 1968, Ln 40, 40A)		0		0	0
36. Total		<b>\$</b> _	0	\$_	0 \$	0
Medi-Cal Administrative Reimbursement						
37. Administrative Reimbursement Limit	(MH 1979, Ln 4)	\$	7,559,553	\$	(2,983) \$	7,556,570
38. Medi-Cal Administration	(MH 1979, Ln 5)	s —	7,155,051	\$ —	323,265 \$	7,478,316
39. Medi-Cal Reimbursement	(Lower of Ln 37, Ln 38)	s	7,155,051	<u>\$</u> –	323,265 \$	7,478,316
37. Medi-ear Kennodisement	(Lower of Eli 37, Eli 38)	<b>"</b> =	7,155,051	*=	323,203	7,478,510
Healthy Families Administrative Reimbursement						
40. Healthy Families Administrative Reimbursement L	imit (MH1979, Ln 8)	\$	68,877	\$_	(11,647) \$	57,231
41. Healthy Families Administration	(MH1979, Ln 9)	\$	97,383	\$	(31,337) \$	66,046_
42. Healthy Families Administrative Reimbursement	(Lower of Ln 40, Ln 41)	\$	68,877	\$	. (11,647) \$	57,231
Heilipation Davison Daimburgament						
Utilization Review Reimbursement	(MIII070 L = 14 Cal D)	ø	217.672	¢.	(76.001) 6	140 662
43. Skilled Professional	(MH1979, Ln 14, Col. D)	-	217,573	-	(76,921) \$	140,652
44. Other Medi-Cal U.R.	(MH1979, Ln 15, Col. D)	<sup>\$</sup> =	894,182	<b>S</b> =	38,743 \$	932,925
Net SD/MC Reimbursement - FFP						
45. Direct Services	(MH1979, Ln 16,16A)	\$	14,938,082	\$	(823,755) \$	14,114,327
46. Enhanced (Children)	(MH1979, Ln 17,17A)		254,988		35,844	290,832
47. Enhanced (Refugees)	(MH1979, Ln 18)		0.		0	0
48 MAA	(MH 1979, Ln 11, 12 & 1	3)	409,959		(56,631)	353,329
49. Administrative Reimbursement	(MH1979, Ln 6)	,	3,577,526		161,633	3,739,158
50. U.R. Skilled Professional	(MH1979, Ln 14)		163,180		(57,691)	105,489
51. U.R. Other	(MH1979, Ln 15)		447,091		19,372	466,463
52. Negotiated Rate-Payback	(MH1979, Ln 20)		0		0	0
53. Subtotal- FFP	,,	\$_	19,790,826	\$_	(721,228) \$	19,069,598
		_		_		
54. Contract Limitation Adjustment	(MH 1979, Ln 22)	\$	0	\$	0 \$	0
55. Quality Assurance Review Results	(Adj # 87)	_	0	-	137,929	137,929
56. Total SD/MC Reimbursement - FFP		\$	19,790,826	\$	(859,157) \$	18,931,669
Net Healthy Families Reimbursement - FFP		-		=		
57. Healthy Families Net Reimbursement	(MH1979, Ln 24,24A)	\$	261,102	\$	(75,703) \$	185,400
58. Negotiated Rate Exceed Costs	(MH1979, Ln 26)	•	0	-	0	0
59. Administrative Reimbursement	(MH1979, Ln 10)		44,770		(7,570)	37,200
60 Total Healthy Families Reimbursement - FFP	\	s	305,872	- \$ -	(83,273) \$	222,599
		=	202,072	= =	(-2,272)	
61. Total - FFP (Ln 56 + Ln 60)		\$_	20,096,698	\$_	(942,430) \$	19,154,269
		_		_		(To Sch. 1)

			(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(40)
		(1)		Enhanced -	Total	Healthy	Medi-Cal	Enhanced -	Enhanced -	Total	Healthy
_		Medi-Cal	Enhanced -		Gross Cost	Families	and Crossover	Children	Refugees	Gross Cost	Families
Legai		and Crossover	Children	Refugees Gross Cost	(Excl. HFP)	Gross Cost	Gross Cost	Gross Cost	Gross Cost	(Excl. HFP)	Gross Cost
Entity		Gross Cost	Gross Cost			salahahahahaha	Enteres de la constante de la		P A T	E N T	
Number	Legal Entity			* * * * * * * * * * * * * * * * * * * *	(Col. 1 to 3)	(MH 1968,	(MH 1968,	(MH 1968,	(MH 1968.	(Col. 6 to 8)	(MH 1968,
		(MH 1968,	(MH 1968,	(MH 1968,	(Col. 1 to 3)	Ln 27, 27A)	Ln 5, 5A, 10,10A)	Ln 16, 16A)	Ln 22)	(00 0 to 0)	Ln 27, 27A)
		Ln 5, 5A, 10,10A)	Ln 16, 16A)	Ln 22)		L(121, 21A)	2(15,5)1, 10,10/1	211 101 101 1			, . ,
00503	For For Conden	s 0 \$	0	s 0 \$	0 \$	0 \$	1,468,613 \$	3,549 \$	0 \$	1,472,162 \$	3,676
00F07	. 66.101 5611166	\$ 0\$ \$ 0\$	ő	-	0 \$	0 \$	58,967 \$	0 \$	0 \$	58,967 \$	0
00104	Donita House, the	s 0 \$	o :	6 0 \$	0 \$	0 \$	1,135,848 \$	0 \$	0 \$	1,135,848 \$	2,433
00106 00108	CA CHEIR SCHOOL INC	\$ 0 <b>\$</b>	o :		0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	0
00108	relection corporation	\$ 0 <b>\$</b>	0		0 \$	0 \$	0 \$		0 \$	0 \$	0
00109	Lincoln Child Center	s 0 \$	Ö	•	0 \$	0 \$	1,350,596 \$	0 \$		1,350,596 \$	55,631
00112		s 0 \$	0		0 \$	0 \$	1,362,554 \$		0 \$	1,362,554 \$	42,056
00115	Trough mon routh benton	s 0 \$	0	6 0 \$	0 \$	0 \$	4,137,237 \$	36,617 \$	0 \$	4,173,854 \$	32,168
00119	Geneca Center	s 0 \$	0		0 \$	0 \$	632,860 \$		0 \$	637,618 \$	0
00120	Contra Cost Fladou of Floria	s 0 \$	0	6 0 \$	0 \$	0 \$	639,606 \$		0 \$	639,606 \$	12,344
00120		s 0 \$	0	6 0 \$	0 \$	0 \$			0 \$	902,155 \$	12,709
00121		s 0.5	0	0 \$	0 \$	0 \$			0 \$	262,704 \$	8,688
00123	•	5 0 \$	0	5 0 \$	0 \$	0 \$	140,608 \$		0 \$	141,139 \$	4,205
00123	Deadurana ( dirimos, me	\$ 0 <b>\$</b>	0 :	0 \$	0 \$	0 \$			0 \$	1,138,524 \$	25,683
00125		s 0 \$	0	0 \$	0 \$	0 \$			0 \$	1,654,200 \$	0
00272		s 0 \$	0	5 0 \$	0 \$	0 \$			0 \$	0 \$	0
00273	-	\$ 0\$	0	5 0 \$	0 \$	0 \$			0 \$	163,442 \$	0
00386		s 0 \$	0	5 0 \$	0 \$	0 \$			0 \$	28,337 \$	0
00444		\$ 0.\$	0	0 \$	0 \$	0 \$			0 \$	963,391 \$	12,408
00445		\$ 0\$	0	5 0 \$	0 \$	0 \$			0 \$	0 \$	0
00457		\$ 0\$	0	0 \$	0 \$	0 \$			0 \$	36,391 \$	0
00458		\$ 0.\$	0 :	5 0 \$	0 \$	0 \$			0 \$	893 \$	0
00461		\$ 0 \$	0	6 0 \$	0 \$	0 \$			0 \$	3,036 \$	0
00467		\$ 0 \$	0	\$ 0 \$	0 \$	0 \$			0 \$	117,820 \$	0
00484	North Valley School	\$ 0 \$	0	5 0 \$	0 \$	0 \$			0 \$	26,127 \$ 0 \$	0
00500		\$ 0 \$	0		0 \$	0 \$			0 \$		0
00520	Youth & Family Services	\$ 0 \$	0		0 \$	0 \$			0 \$	20,220 \$	0
00534	Asian Pacific Psychological Service	\$ 0 \$	0		0 \$	0 \$			0 \$	347,387 \$	0
00536	Thunder Road	\$ 0.\$	0		0 \$	0 \$			0 \$	246,689 \$	0
00541	Charis Youth Center	\$ 0 \$	0	5 0 \$	0 \$	0 \$			0 \$	56,295 \$	=
00551	S.T.A.R.S.	s 0 \$	0 :	5 0 \$	0 \$	0 \$	174,285 \$		0 \$	174,969 \$	733
		\$ 0\$	0	3 0 \$	0 \$	0 \$	12,310 \$		0 \$	12,310 \$	0
		\$ 0.\$	0	, , 0 \$	0 \$	0 \$	358,201 \$		0 \$	360,330 \$	11,579
00641		s 0 \$	0	5 0 \$	0 \$	0 \$			0 \$	76,905 \$	0
00642		\$ 0.\$	0	0 \$	0 \$	0 \$	316,144 \$	0 \$	0 \$	316,144 \$	12,505
00643	•	\$ 0 <b>\$</b>	0	0 \$	0 \$	0 \$	109,286 \$	0 \$	0 \$	109,286 \$	0
00643		\$ 0 <b>\$</b>	o :	•	0 \$	0 \$	3,813 \$	0 \$	0 \$	3,813 \$	0
	Catholic Charlings of The Balan	s 0 \$	0	•	0 \$	0 \$	402 \$	0 \$	0 \$	402 \$	0
00645		•			0 \$	0 \$			0 \$	202,682 \$	0
	Trie ranny monage are made	\$ 0 \$	0		0 \$	0 \$			0 \$	83,989 \$	Ō
	TO GOTT STORE COUNTY OF THE	\$ 0 \$	0		0.5	0 \$			0 \$	54,721 \$	270
	, Git Bon i dino demandration	\$ 0 \$	0		0 \$	0 \$			0 \$	60 \$	0
	Of Indian's Hospital Salatia	\$ 0 \$	0		0 \$	0 \$			0 \$	26,349 \$	Ö
	7 1710 7700 00120110	\$ 0 \$	0		0 \$	0 \$			0 \$	0 \$	Ŏ
	OT COS CITER COGNISSINING	\$ 0 \$	0		0 \$	0 \$			0 \$	152,706 \$	2,386
	Day / 102 / 2,000 mm - py - 2000 mm	\$ 0 \$	0		0 \$	0 \$			1 1	81 \$	0
	Talling Collings of Lan Estates	\$ 0 \$	_	•	0 \$	0 \$			0 \$	2,549 \$	0
	. Annay Controop of the Chief	\$ 0 \$	0		0 \$	0 \$	· · · · · · · · · · · · · · · · · · ·		0 \$	658 \$	0
00765	A Better Way	\$ 0 \$	U	, ,	U V	0 4	, 550 •	•	• •		

		:	(1)	(2)	(3)	(4)	(6)	(6)	(7)	(8)	(9)	(10)
			Medi-Cal	Enhanced -	Enhanced -	Total	Healthy	Medi-Cal	Enhanced -	Enhanced -	Total	Healthy
Legal			and Crossover	Children	Refugees	Gross Cost	Families	and Crossover	Children	Refugees	Gross Cost	Families
Entity			Gross Cost	Gross Cost	Gross Cost	(Excl. HFP)	Gross Cost	Gross Cost	Gross Cost	Gross Cost	(Excl. HFP)	Gross Cost
Number	Legal Entity	E		1 N P	A T I E	N T			o u T	P A T I	E N T	
	<u> </u>	•	(MH 1968,	(MH 1968,	(MH 1968,	(Col. 1 to 3)	(MH 1968,	(MH 1968,	(MH 1968,	(MH 1968,	(Col. 6 to 8)	(MH 1968,
			Ln 5, 5A, 10,10A)	Ln 16, 16A)	Ln 22)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Ln 27, 27A)	Ln 5, 5A, 10,10A)	Ln 16, 16A)	Ln 22)	(	Ln 27, 27A)
				. , ,								
00770	Psychotherapy Institute of Ind. Fami	\$	0 \$	0 \$	0 \$	0 \$	0 \$	32,760 \$	41 \$	0 \$	32,801	\$ 0
00773	Bay Area Community Resources	\$	0 \$	0 \$	0 \$	0 \$	0 \$	347,142 \$	0 \$	0 \$	347,142	\$ 0
00835	New Connections	\$	0 \$	0 \$	0 \$	0 \$	0 \$	113,691 \$	1,699 \$	0 \$	115,390	\$ 0
00857	Hiawatha Harris, Inc	\$	0 \$	0 \$	0 \$	0 \$	0 \$	733 \$	0 \$	0 \$	733	\$ 0
COB69	Family and Child Counseling Center	\$	0 \$	0 \$	0 \$	0 \$	0 \$	20,889 \$	0 \$	0 \$	20,889	\$ 0
00949	Crestwood Behavioral Health	\$	0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	0	\$ 0
03980	Pacific Cnt for Human Growth	\$	0 \$	0 \$	0 \$	0 \$	0 \$	2 \$	0 \$	0 \$	2	\$ 0
D1032	YWCA of Contra Costa	\$	0 \$	0 \$	0 \$	0 \$	0 \$	52,372 \$	603 \$	0 \$	52,975	\$ 0
O1060	Youth Services Bureau	\$	0 \$	0 \$	0 \$	0 \$	0 \$	458,152 \$	0 \$	0 \$	458,152	\$ 0
01067	North Berkeley	\$	0 \$	0 \$	0 \$	0 \$	0 \$	401 \$	0 \$	0 \$	401	\$ 0
01074	New Directions Counseling Cnt	\$	0 \$	0 \$	0 \$	0 \$	0 \$	7,541 \$	0 \$	0 \$	7,541	\$ 0
D1089	Youth Homes, Inc	\$	0 \$	0 \$	D \$	0 \$	0 \$	406,522 \$	62 \$	0 \$	406,584	\$ 0
01109	Mt. Diable USD WrapAround & Counsel	\$	0 \$	0 \$	0 \$	0 \$	0 \$	127,107 \$	0 \$	0 \$	127,107	
01131	Rubino Counseling Services	\$	0 \$	0 \$	0 \$	0 \$	0 \$	8,797 \$	0 \$	0 \$	8,797	<b>5</b> 0
01139	Bay Area Psychotherapy Service	\$	0 \$	0 \$	0 \$	0 \$	0 \$	4,682 \$	0 \$	0 \$	4,682	1,893
01143	Discovery Counseling Center	\$	0 \$	0 \$	0 \$	0 \$	0 \$	8,194 \$	0 \$	0 \$	8,194	\$ 0
D1 157	The Lucas Center	\$	0 \$	0 \$	0 \$	0 \$	0 \$	25,456 \$	1,365 \$	0 \$	26,821	5 D
01165	Carrie McCluer	\$	0 \$	0 \$	0 \$	0 \$	. 0 \$	6,326 \$	0 \$	0 \$	6,326	0
01182	West Contra Costa USD	\$_	0_\$	0_\$	0_\$_	0 \$_	0_\$	\$	<u>0</u> \$_	0 \$_	21,751	S0_
	TOTAL	\$	0 \$	0 \$	0 \$	0 \$	0 \$	20,105,493 \$	58,704 \$	0 \$	20,164,197	241,367

.

		(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)
		Total	Healthy	Total	Healthy	Total		Total		Total
11		Revenue	Families	Revenue	Families	Net Cost	Net Cost	Net Cost	Net Cost	MAA
Legal		(Excl. HFP)	Revenue	(Excl. HFP)	Revenue	(Excl. HFP)	Healthy Families	(Excl. HFP)	Healthy Families	FFP
Entity	Lacal Eatific	E NEAT		OUTPA		INPA	TIENT	OUTEA	TIENT	Reimbursement
<u>Number</u>	<u>Legal Entity</u>	(MH 1968,	(MH 1968,	(MH 1968,	(MH 1968,	(Col 4-11)	(Col 5-12)	(Col 9-13)	(Col 10-14)	(MH 1979.
		Ln 28 to 30)	Ln 31)	Ln 28 to 30)	Ln 31)	(	, ,			Ln 11-13)
		[11 28 (0 30)	Lii 31)	211 20 10 007	2,					
00F07	Fee-For-Service	s 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	1,472,162 \$		0
00104	Bonita House, Inc	\$ 0.\$	0 \$	0 \$	0 \$	0 \$	0 \$	58,967 \$		0
00106	LA Cheim School, Inc	\$ 0\$	0 \$	127 \$	0 \$	0 \$	0 \$	1,135,721 \$		0
00108	TeleCare Corporation	\$ 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	0 \$		0
00109	Asian Community Mental Board	\$ 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	0
00112	Lincoln Child Center	\$ 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	1,350,596 \$		0
	Fred Finch Youth Center	\$ 0 \$	0 \$	217 \$	0 \$	0 \$	0 \$	1,362,337 \$		0
00115	Seneca Center	\$ 0 \$	0 \$	372 \$	0 \$	0 \$	0 \$ 0 \$	4,173,482 \$ 637,618 \$	32,168 <b>\$</b> 0 <b>\$</b>	0
00119	Contra Cost Assoc, of Retard	\$ 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$ 0 \$	634,949 \$	12.344 \$	0
00120	Families First Inc.	\$ 0 \$	0 \$	4,657 \$	0 \$	0 \$ 0 \$	0 \$	902,155 \$		0
00121	We Care Society, Inc	\$ 0 \$	0 \$	0 \$	0 \$ 0 \$	0 \$ 0 \$	0 \$	262,704 \$	8,688 \$	ñ
00122	YMCA of The East Bay, Inc.	\$ 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	141,139 \$	4,205 \$	Ô
00123	Desarrollo Families, Inc.	\$ 0 \$	0 \$	0 \$ 0 \$	0 \$	0 \$	0 \$	1,138,524 \$	25,683 \$	Ō
00124	Early Childhood MH Program	\$ 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	1,654,200 \$	0 \$	Ö
00125	Phoenix Programs, Inc.	\$ 0 \$	0 \$ 0 \$	0.5	0 \$	0 \$	0 \$	0 \$	0 \$	0
00272	Canyon Manor Residential Treatment	\$ 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	163,442 \$	0 \$	0
00273	Edgewood Center for Children	\$ 0 \$ \$ 0 \$	0 \$	. 0 \$	0 \$	0 \$	0 \$	28,337 \$	0 \$	0
00386	Mihous Children's Services	\$ 0.5	0 \$	0 \$	0 <b>\$</b>	0 \$	0 \$	963,391 \$	12,408 \$	0
00444	Rubicon Programs, Inc.	\$ 0\$	0 \$	0 \$	0 s	0 \$	0 \$	0 \$	0 \$	0
00445	Mental Health Consumer Concerns Sunny Hills Children's Garden	\$ 0\$	0 \$	0 \$	0 \$	0 \$	0 \$	36,391 \$	0 \$	0
00457 00458	Family Service Agency of Marin	\$ 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	893 \$		0
00456	Summit View	s 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	3,036 \$	0 \$	0
00467	Moss Reach Homes, Inc	s 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	117,820 \$	0 \$	0
00484	North Valley School	\$ 0\$	0 \$	0 \$	0 \$	0 \$	0 \$	26,127 \$		0
00500	Contra Costa Crisis & Sucide Interven	\$ 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	0
00520	Youth & Family Services	\$ 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	20,220 \$	0 \$	0
00534	Asian Pacific Psychological Service	\$ 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	347,387 \$	0 \$	
00536	Thunder Road	\$ 0 \$	. 0 \$	0 \$	0 \$	0 \$	0 \$	246,689 \$	0 \$	0
00541	Charis Youth Center	\$ 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	56,295 \$		•
00551	S.T.A.R.S.	s 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	174,969 \$	733 \$	0
00620	Child Therapy Inst of Marin	\$ 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	12,310 \$	0 \$	0
00639	Rape Crisis Center	\$ 0 \$	0 \$	1,641 \$	0 \$	0 \$	0 \$	358,689 \$	11,579 \$	0
00641	West Coast Children's Center	\$ 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	76,905 \$		
00642	Family Stress Center	\$ 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	316,144 \$	12,505 \$	0
00643	Jewish Family & Children's Svs	\$ 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	109,286 \$	0 \$	0
00644	Catholic Charities of The East	\$ 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	3,813 \$		0
00645	Battered Women's Afternative	\$ 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	402 \$	0 \$	0
		•	0 \$	0 \$	0 \$	0 \$	0 \$	202,682 \$	0 \$	0
00667	The Family Institude of Pinole	\$ 0 \$ \$ 0 \$	0 \$	0 \$	ŏ \$		0 \$	83,989 \$	0 \$	
00670	Touchstone Counseling Service Porti Bell Hume Behavioral HI	\$ 0\$	0 \$	0 \$	0 \$	0 \$	0 \$	54,721 \$	270 \$	0
00 700	Children's Hospital Oakland	\$ 0\$	0 \$	0 \$	0 \$	0 \$	0 \$	60 \$	0 \$	
00 702 20707	Pine Tree Gardens	\$ 0\$	0 \$	0 \$	0 \$	0 \$	0 \$	26,349 \$	0 \$	0
00707 00735	Cross Creek Counselling	\$ 0 <b>\$</b>	0 \$	0 \$	0 \$	0 \$	0 \$	0 \$		
00750	Bay Area Psychotherapy Service	\$ 0\$	0 \$	0 \$	0 \$	0 \$	0 \$	152,706 \$	2,386 \$	0
00758	Family Service of San Leandro	\$ 0\$	0 \$	0 \$	0 \$	0 \$	0 \$	81 \$	0 \$	
00759	Family Services of Tri-Cities	\$ 0\$	0 \$	0 \$	0 \$	0 \$	0 \$	2,549 \$	0 \$	
	A Better Way	\$ 0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	658 \$	0 \$	0

		9		(12)		(13)	(14)	(15)		(16)	(17)	(1B)	(19)
			Total	Healthy		Total	Healthy	Total			Total		Total
Legal			Revenue	Families		Revenue	Families	Net Cost		Net Cost	Net Cost	Net Cost	MAA
Entity			(Excl. HFP)	Revenue		(Excl. HFP)	Revenue	(Excl. HFP)	_	Healthy Families	(Excl. HFP)	Healthy Families	FFP
Numbe	r Legal Entity		INPAT	1 E N T	ΙŒ	DUTPAT	I E N T	INF	AI	ENT	OUTPA	AT LENT	Reimbursement
<u> </u>		_	(MH 1968,	(MH 1968,	-	(MH 1968,	(MH 1968,	(Col 4-11)		(Col 5-12)	(Col 9-13)	(Col 10-14)	(MH 1979,
			Ln 28 to 30)	Ln 31)		Ln 28 to 30)	Ln 31)						Ln 11-13)
00770	Psychotherapy Institute of Ind. Fami	\$	0 \$	0	\$	0 \$	0 \$	i (	0 \$	0 \$	32,801 \$	0 \$	О
00773	Bay Area Community Resources	\$	0 \$	0	\$	0 \$	0 \$	,	0 \$	0 \$	347,142 \$	0 \$	0
00835	New Connections	\$	0 \$	0	\$	0 \$	0 \$	i .	0 \$	0 \$	115,390 \$	0 \$	0
00857	Hiawatha Hamis, Inc	\$	0 \$	0	\$	0 \$	0 \$	1	0 \$	0 \$	733 \$	0 \$	0
00869	Family and Child Counseling Center	\$	0 \$	0	\$	0 \$	0 \$	(	0 \$	0 \$	20,889 \$	0 \$	0
00949	Crestwood Behavioral Health	\$	0 \$	0	\$	0 \$	0 \$	(	0 \$	0 \$	0 \$	0 \$	0
00980	Pacific Cnt for Human Growth	\$	0 \$	0	\$	0 \$	0 \$	(	0 \$	0 \$	2 \$	0 \$	0
01032	YWCA of Contra Costa	\$	0 \$	0	\$	0 \$	0 \$	1	0 \$	0 \$	52,975 \$	0 \$	0
01060	Youth Services Bureau	\$	0 \$	0	\$	0 \$	0 \$	(	0 \$	0 \$	458,152 \$	0 \$	0
01067	North Berkeley	\$	0 \$	0	\$	0 \$	0 \$		0 \$	0 \$	401 \$	0 \$	0
01074	New Directions Counseling Cnt	\$	0 \$	0	\$	0 \$	0 \$	(	0 \$	0 \$	7,541 \$	0 \$	0
01089	Youth Homes, Inc	\$	0 \$	0	\$	0 \$	0 \$		0 \$	0 \$	406,584 \$	0 \$	0
01109	Mt. Diablo USD WrapAround & Counsel	\$	0 \$	0	\$	0 \$	0 \$	(	0 \$	0 \$	127,107 \$	0 \$	0
01131	Rubino Counseling Services	\$	0 \$	0	\$	0 \$	0 \$	(	0 \$	0 \$	8,797 \$	0 \$	0
01139	Bay Area Psychotherapy Service	\$	0 \$	0	\$	0 \$	0 \$	(	0 \$	0 \$	4,682 \$	1,893 \$	0
01143	Discovery Counseling Center	\$	0 \$	D	\$	0 \$	0 \$	(	D \$	0 \$	8,194 \$	0 \$	0
01157	The Lucas Center	\$	0 \$	0	\$	0 \$	0 \$	(	0 \$	0 \$	26,821 \$	0 \$	0
01 165	Carrie McClier	\$	0 \$	0	\$	0 \$	0 \$	(	0 \$	0 \$	6,326 \$	0 \$	0
01182	West Contra Costa USD	\$	0_\$	0_	\$_	0_\$	0_\$		<u> </u>	0 \$_	<u>21,751</u> \$	0_\$	
	TOTAL	\$	0 \$	0	\$	7,014 \$	0 \$	(	0 \$	0 \$	20,157,183 \$	241,367 \$	0

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								Vine	7371	<del>(28)</del>
		(20)	(21)	(22)	(23) No Bates	(24)	(25)	(26)	(27)	1446
		Neg. Rates	Neg. Rates	Neg. Rates	Neg. Rates Exceed Costs	Total SD/MC	Healthy Families	Total	FFP	Lower of FFP
Legal		Exceed Costs	Exceed Costs	Exceed Costs (Excl. HFP)	Healthy Families	Reimbursement	Reimbursement	Reimbursement	Contract	or Contract
Entity		(Excl. HFP)	Healthy Families		TEENT	(FFP)	(FFP)	(FFP)	Maximum	Maximum
Num ber	<u>Legal Entity</u>	the state of the s	TENT	(MH 1968	(MH 1968	(MH 1979, Line 21)	(MH 1979, Ln. 27)	(Col. 24 + 25)		
		(MH 1968, Ln 38 to 39)	(MH 1968, Ln 40, 40A)	(MH 1908) Ln 38 to 39)	Ln 40, 40A)	(IVIT) 1313, Citie 21)	(1011) 1010, 211, 211	(50)		
		LI136 to 337	211 40, 40/1	211 00 10 00,	211 141 121 1					
00F07	Fee-For-Service	s 0 \$	0 \$	0 \$	0 \$				933,607 \$	786,634
001 04	Bonita House, Inc	\$ 0.5	0 \$	, 0 \$	0 \$				60,016 \$	31,267
00106	LA Cheim School, Inc	\$ 0 \$	0 \$	0 \$	0 \$				835,788 \$	606,157
00 1 QB	TeleCare Corporation	\$ 0 \$		0 \$	0 \$				575,945 \$ 0 \$	0
001 Ø9	Asian Community Mental Board	\$ 0 \$		0 \$	0 \$				829,232 \$	754.532
00112	Lincoln Child Center	\$ 0 \$		0 \$	0 \$				1.451.885 \$	753,859
00113	Fred Finch Youth Center	\$ 0 \$	- :	0 \$	0 \$				3,133,336 \$	2,248,927
00115	Seneca Center	\$ 0 \$		0 \$	0 <b>\$</b>				514.470 \$	340,133
00119	Contra Cost Assoc. of Retard	\$ 0 \$		0 \$	0 1			· ·	539,866 \$	346,994
00120	Families First Inc.	\$ 0 \$		0 \$ 0 \$	0 1		1,112		648.980 \$	488,494
00121	We Care Society, Inc	\$ 0.5		0 \$	0 \$				159,477 \$	145,040
00122	YMCA of The East Bay, Inc	\$ 0 \$ \$ 0 \$		0 \$	0 \$				148,290 \$	77,930
001.23	Desarrollo Families, Inc			0 \$	0 5	·			722,138 \$	623,796
00124	Early Childhood MH Program	\$ 0 \$ \$ 0 \$	- •	0 <b>\$</b>	o s			882,602 \$	1,921,139 \$	882,602
00125	Phoenix Programs, Inc.	\$ 0.5	·	0 \$	0 \$			0 \$	39,339 \$	0
00272	Canyon Manor Residential Treatment	s 0 \$		0 <b>\$</b>	0 \$	86,941 \$	. 0 \$	86,941 \$	156,224 \$	86,941
00273	Edgewood Center for Children Mihous Children's Services	\$ 0.5		0 \$	0 \$	15,094 \$	. 0 \$	15,094 \$	\$ 000,60	15,094
00386 00444	Rubicon Programs, Inc.	\$ 0.5		0 \$	0 \$	514,662 \$	8,065 \$	522,727 \$	743,872 \$	522,727
00445	Mental Health Consumer Concerns	s 0 \$	0 \$	0 \$	0 \$	0 \$	O \$		339,335 \$	0
00445	Sunny Hills Children's Garden	s 0 s	0 \$	0 \$	0 \$				112,806 \$	19,328
00458	Family Service Agency of Marin	\$ 0 \$	0 \$	0 \$	0 \$				0 \$	0
00461	Summit View	\$ 0 \$	0 \$	0 \$	0 \$	·	_ :		4.422 \$	1,608
00467	Moss Reach Homes, Inc	\$ 0 \$	0 \$	0 \$	0 \$	_			26,650 \$	26,650 0
00484	North Valley School	\$ 0 \$	0 \$	0 \$	0 \$				0 \$	υ 0
005 <b>0</b> C	Contra Costa Crisis & Sucide Interven.	\$ 0 \$		0 \$	0 \$			- •	57,683 \$ 11,604 \$	10,813
00520	Youth & Family Services	\$ 0 \$		0 \$	0 \$				230,742 \$	184,883
00534	Asian Pacific Psychological Service	\$ 0 \$	- •	0 \$	0 \$	·			187,922 \$	131,602
00536	Thunder Road	\$ 0 \$		0 \$	0 \$		_ :		29,365 \$	29,365
00541	Charis Youth Center	\$ 0 \$		0 \$			- •	- •	258,235 \$	93,213
00551	S.T.A.R.S.	\$ 0 \$		0 \$	0 \$			•	256,235 \$	53,213 D
00620	Child Therapy Inst of Marin	\$ 0 \$		0 \$	0 \$		- •	,	267,715 \$	199.904
00639	Rape Crisis Center	\$ 0 \$		0 \$	0 \$				26,650 \$	26,650
0064 1	West Coast Children's Center	\$ 0 \$		0 \$	0 \$			•	373,714 \$	176,586
00642	Family Stress Center	\$ 0 \$		0 \$			. –		39,975 \$	39,975
00643	Jewish Family & Children's Svs	\$ 0.5		0 \$	0 \$				2,043 \$	2,043
00644	Catholic Charities of The East	\$ 0 \$	· 0 \$	0 \$	0 \$				· ·	
00645	Battered Women's Alternative	\$ 0 \$	0 \$	0 \$	0 \$	. 213 \$			214 \$	213
00667	The Family Institude of Pinole	\$ 0 \$	0 \$	0 \$	0 \$	107,809 \$			26,650 \$	26,650
00674	Touchstone Counseling Service	s 0 \$		0 \$	0 \$	44,777 \$			30,914 \$	30,914
00700	Porti Bell Hume Behavioral HI	\$ 0 \$	0 \$	0 \$	0 \$				26.650 \$	26,650
00702	Children's Hospital Oakland	\$ 0 \$	0 \$	0 \$	0 \$				0 \$	0
00707	Pine Tree Gardens	\$ 0 \$	0 \$	0 \$	0 \$				0 \$	0
00735	Cross Creek Counselling	\$ 0 \$		0 \$	0 \$				0 \$ 26.650 <b>\$</b>	26,650
00750	Bay Area Psychotherapy Service	\$ 0 \$		0 \$	0 \$				26,650 \$ 0 \$	26,650 0
00758	Family Service of San Leandro	\$ 0 \$		0 \$	0 \$				2,410 \$	1,355
00759	Family Services of Tri-Cities	\$ 0 \$	1 1	0 \$	0 \$				2,410 \$	1,355
00765	A Better Way	\$ 0 \$	0 \$	0 \$	0 \$	352 \$	U \$	J32 \$	0 \$	U

			(20)	(21)		(22)	(23)		(24)	(25)		(26)		(27)	(28)
			Neg. Rates	Neg. Rates		Neg. Rates	Neg. Rates								
Legal			Exceed Costs	Exceed Costs		Exceed Costs	Exceed Costs		Total SD/MC	Healthy Families		Total		FFP	Lower of FFP
Entity		_	(Excl. HFP)	Healthy Families		(Excl. HFP)	Healthy Families		Reimbursement	Reimbursement		Reimbursement		Contract	or Contract
<u>Number</u>	<u>Legal Entity</u>			TIENT	L	OUTPA		1	(FFP)	(FFP)		(FFP)	_	Maximum	Maximum
			(MH 1968,	(MH 1968,		(MH 1968,	(MH 1968,		(MH 1979, Line 21)	(MH 1979, Ln. 27)		(Col. 24 + 25)			
			Ln 38 to 39)	Ln 40, 40A)		Ln 38 to 39)	Ln 40, 40A)								
00770	Psychotherapy Institute of Ind. Fami	\$	0 \$	0	\$	0 \$	0	\$	17,456 \$	. 0	\$	17,456	\$	26,650 \$	17,456
00773	Bay Area Community Resources	\$	0 \$	0	\$	0 \$	0	\$	183,929 \$	0	\$	183,929	\$	198,657 \$	183,929
00835	New Connections	\$	0 \$	0	\$	0 \$	0	\$	61,757 \$	. 0	\$	61,757	\$	107,278 \$	61,757
00857	Hiawatha Harris, Inc	\$	0 \$	0	\$	0 \$	, O	\$	388 \$	0	\$	388	\$	0 \$	0
00869	Family and Child Counseling Center	\$	0 \$	0	\$	0 \$	0	\$	11,182 \$	0	\$	11,182	\$	0 \$	0
00949	Crestwood Behavioral Health	\$	0 \$	0	\$	0 \$	0	\$	0 \$	0	\$	0	\$	0 \$	0
00980	Pacific Cnt for Human Growth	\$	0 \$	0	\$	0 \$	0	\$	1 \$	0	\$	1 :	\$	0 \$	0
01032	YWCA of Contra Costa	\$	0 \$	0	\$	0 \$	0	\$	28,280 \$	0	\$	28,280	\$	0 \$	0
01060	Youth Services Bureau	\$	0 \$	0	\$	0 \$	0	\$	243,924 \$	0	\$	243,924	\$	245,135 \$	243,924
01067	North Berkeley	\$	0 \$	0	\$	0 \$	0	\$	212 \$	0	\$	212	\$	303 \$	212
01074	New Directions Counseling Cnt	\$	0 \$	0	\$	0 \$	0	\$	3,996 \$	0	\$	3,996	\$	4,257 \$	3,996
01089	Youth Homes, Inc	\$	0 \$	0	\$	0 \$	0	\$	216,473 \$	0	\$	216,473	\$	239,847 \$	216,473
01109	Mt Diablo USD WrapAround & Counsel	\$	0 \$	0	\$	0 \$	0	\$	67,657 \$		\$	67,657	\$	101,083 \$	67.657
01131	Rubino Counseling Services	\$	0 \$	0	\$	0 \$	0	\$	4,689 \$		\$	4,689	\$	0 \$	0
01139	Bay Area Psychotherapy Service	\$	0 \$	. 0	\$	0 \$	0	\$	2,486 \$	1,231	\$	3,717		26,643 \$	3,717
01143	Discovery Counseling Center	\$	0 \$	0	\$	0 \$	0	\$	4,339 \$	0	\$	4,339	\$	0 \$	0
01157	The Lucas Center	\$	0 \$	0	\$	0 \$	0	\$	14,372 \$	0	\$	14,372		0 \$	0
01165	Carrie McClier	\$	0 \$	0	\$	0 \$	0	\$	3,353 \$	0	\$	3,353	\$	4,218 \$	3,353
01182	West Contra Costa USD	\$_	0 \$	0	\$	0_\$_	0	\$	<u>_11,517</u> _\$	0	\$_	11,517_ \$			11,517
	TOTAL	\$_	0 \$	0	\$	0_\$_	0	\$	10,745,570 \$	156,891	\$_	10,902,461	\$	16,543,472 \$	10,580,170

## CONTRA COSTA COUNTY COMMUNITY MENTAL HEALTH SERVICES COMPUTATION OF EPSDT STATE SHARE PER AUDIT FISCAL YEAR ENDED JUNE 30, 2004

	As Settled	Audit Adjustments	As Audited
(1) SD/MC Actuals (MH 1979, Lns. 16, 16A, 17, 17A, 18) (including contractors)	41,793,451	(208,979)	41,584,472
(2) Total SD/MC Claims	41,277,112		41,277,112
(3) Percent % (Line 1/Line 2)	101.25%	-0.51%	100.74%
(4) EPSDT Claims	26,415,988		26,415,988
(5) Actual Cost Settled EPSDT SD/MC (Line 3 X Line 4)	26,746,188	(133,499)	26,612,689
(6) Cost Settled Baseline for EPSDT	4,753,984	0	4,753,984
(7) Net Cost Settlement Amount (Line 5 - Line 6)	21,992,204	(133,499)	21,858,705
(8) 46.70% of Cost Settlement Amount (Line 7 x 46.70%)	10,270,359	(62,344)	10,208,015
(8a) FY 2001-02 EPSDT Settlement	6,905,120	0	6,905,120
(8b) Annual Local Growth (L. 8 - 8a)	3,365,239	(62,344)	3,302,895
(9) County Match 10% of Local Growth (8b x 10%)	336,524	(6,234)	330,290
(10) Net Cost Settlement Amount (L. 8 - 9)	9,933,835	(56,109)	9,877,726
(11) SGF Distribution (Settled and Audited)	9,933,835	0	9,933,835
(12) SGF Due County (State)	0	(56,109)	(56,109)
			(To Sch. 1)

#### Source:

- (1) Total CFRS SD/MC actuals after final Settlement (Col. 1) and Audit (Col. 3) for Net Direct Outpatient Services (includes Mode 05 SF's 20-94, Mode 10, and Mode 15)
- (2) Total SD/MC paid claims (total non-hospital, including PHF's) by County Submitting Claims (inclues contract providers, excludes Healthy Families)
- (4) SD/MC paid claims for children under 21 years of age (full scope, non-hospital, including PHF's) including new aid codes by County of Beneficiary
- (6) Cost Settled Baseline for EPSDT for FY 2003-2004, includes increase for FFS/MC provider rate increase
- (11) SGF gross distribution (See DMH letter dated August 1, 2003 sent to Local Mental Health Directors) Includes adjustment for additional SGF or Audit Recovery.
- (12) Amount owed back to the state cannot be more than was advanced or settled.

Provide			<del></del>		Provider Number	No. of Adj. 89		eriod Ended 30, 2004
	CONTRA CO	OSTA C	OUNTY		00007	69	Julie	30, 2004
	Report Ref	егепсе				As	Increase	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	NTS 	Reported	(Decrease)	Adjusted
				ADJUSTMENTS TO REPORTED COSTS				
1 2	MH 1960 MH 1960	1 3	C	MENTAL HEALTH EXPENDITURES PAYMENT TO CONTRACT PROVIDERS		\$ 104,433,929 \$ (36,138,837)	\$ 643,619 \$ (643,619)	\$ 105,077,548 \$ (36,782,456)
				To adjust reported MH Expenditures and Payments to Contract with the County's records and supporting documentation.	ts to agree			
3	MH 1960	8	С	ALLOWABLE COSTS FOR ALLOCATION		\$ 68,575,830	\$ 239,842	\$ 68,815,672 *
				To adjust A-87 COWCAP costs to agree with formally approve 5/29/2003.	d plan dated			
4 5	MH 1960 MH1960	8 18	C	ALLOWABLE COSTS FOR ALLOCATION MODE COSTS (DIRECT SERVICE AND MAA)		** \$ 68,815,672 \$ 55,210,360	\$ (181,865) \$ (181,865)	\$ 68,633,807 \$ 55,028,495
3	Wii 11300			To disallow MAA expenses to agree with the County's records documentations.	and supporting			
6	MH 1960	9	3	SD/MC ADMINISTRATION HEALTHY FAMILIES ADMINISTRATION		\$ 7,155,051 \$ 97,383	\$ (7,155,051) \$ (97,383)	\$ - * \$ - *
7 8	MH 1960 MH 1960	10	3	NON SD/MC ADMINISTRATION		\$ 4,452,335	\$ (4,452,335)	- *
o	MH 1960	12	3	TOTAL ADMINISTRATIVE COSTS		\$ 11,704,769		\$ 11,704,769 *
				To eliminate the reported distribution of administrative costs. (redistributed after adjustments to administrative costs below.	Costs will be			
9	MH 1960	12	3	TOTAL ADMINISTRATIVE COSTS		<b>**</b> \$ 11,704,769	\$ 239,842	\$ 11,944,611 *
				To adjust administrative costs in conjunction with adjustment r	number 3.			
ı								
ĺ				Balance carried forward to subsequent adjustment.     Balance brought forward from prior adjustment.				

California Health and Human Services Agency Department of Mental Health

Provide	er CONTRA C		OUNTV		Provider Number 00007	No. of Adj.	1	Period Ended
-	Report Ref		OUNTT		00007	<del>                                     </del>	<del> </del>	30, 2004
Adj.	Form/ Sch.	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	NTS	As Reported	Increase (Decrease)	As Adjusted
				ADJUSTMENTS TO REPORTED COSTS				
10 11 12	MH 1960 MH 1960 MH 1960 MH 1960	9 10 11 12	3 3 3 3	SD/MC ADMINISTRATION HEALTHY FAMILIES ADMINISTRATION NON SD/MC ADMINISTRATION TOTAL ADMINISTRATIVE COSTS  To allocate total administrative cost among SD/MC, Healthy F.	amilies and	** \$ - ** \$ - ** \$ - ** \$ 11,944,611	\$ 7,478,316 \$ 66,046 \$ 4,400,249	\$ 7,478,316 \$ 66,046 \$ 4,400,249 \$ 11,944,611
				Non SD/MC Administration based on the gross cost method p of 62.6083% for SD/MC, 0.5529% for Healthy Families, and 36 Non SD/MC.	ercentages			
13 14 15	MH 1960 MH 1960 MH 1960 MH 1960	13 14 15 16	3	SKILLED PROFESSIONAL MEDICAL PERSONNEL OTHER SD/MC UTILIZATION REVIEW NON SD/MC UTILIZATION REVIEW TOTAL UTILIZATION REVIEW COSTS		\$ 217,573 \$ 894,182 \$ 548,946 \$ 1,660,701	\$ (76,921) \$ 38,743 \$ 38,178	\$ 140,652 \$ 932,925 \$ 587,124 \$ 1,660,701
				To allocate the Non SD/MC Utilization Review portion related t Other SD/MC Utilization Review using the audited gross cost p 64.6460% for SD/MC and 35.3540% for Non SD/MC.				
16 17	MH 1964 MH 1964	7 9		ADJUSTMENTS TO REPORTED MODES OF SER  MEDI-CAL ADMINISTRATIVE ACTIVITIES (MODE 55)  TOTAL DIRECT SERVICES	VICE	\$ 1,079,594 \$ 55,210,360	\$ (181,865) \$ (181,865)	\$ 897,729 \$ 55,028,495
1,	WITT 1904	9	,   	To adjust costs at the mode level in conjunction with adjustme	nt number 5.	\$ 55,210,300	\$ (101,000)	\$ 55,026,495
			_	Balance carried forward to subsequent adjustment.     Balance brought forward from prior adjustment.				

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Provide	 r		<del></del> ,		Provider Number	No. of Adj.	Fiscal Po	eriod Ended
	CONTRA CO	OSTA C	YTNUC		00007	89	June	30, 2004
	Report Refe	erence				As	Increase	As
Adj. No.	Form/ Sch.	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	NTS	Reported	(Decrease)	Adjusted
140.	OCIT.	Line	- 001.	ADJUSTMENTS TO REPORTED GROSS COS	<u> </u>			
18	MH 1966A	3		MODE 05 SERVICE FUNCTION 05/10		\$ 18,691,227	(1,583,402)	\$ 17,107,825
19	MH 1966A	3		SERVICE FUNCTION 05/19		\$ 453,368	1,583,402	\$ 2,036,770
				MODE 10				
20	MH 1966A	3		SERVICE FUNCTION 10/20 SERVICE FUNCTION 10/81		\$ 2,736,129 \$ 539,952	395,157 (98,733)	\$ 3,131,286 \$ 441,219
21 22	MH 1966A MH 1966A	3		SERVICE FUNCTION 10/81		\$ 2,200,423	(296,424)	\$ 1,903,999
				MODE 15				
23	MH 1966A	3	Ī	SERVICE FUNCTION 15/01		\$ 2,347,847	(14,928)	\$ 2,332,919
24	MH 1966A	3		SERVICE FUNCTION 15/10		\$ 13,650,870 \$ 9,810,584	10,476 22,960	\$ 13,661,346 \$ 9,833,544
25 26	MH 1966A MH 1966A	3		SERVICE FUNCTION 15/60 SERVICE FUNCTION 15/70		\$ 2,176,346	(18,508)	\$ 2,157,838
				To adjust the regular Medi-Cal reported gross cost at the service filevel to reflect the RVS method of allocation.	unction			
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				* Balance carried forward to subsequent adjustment.     ** Balance brought forward from prior adjustment.				
L		L		Balance brought forward from phot dejuctment.		<u> </u>		

Provide					Provider Number	No. of Adj.	Fiscal Peri	
	CONTRA CO	OSTA CO	YTNUC		00007	89	June 30	
	Report Ref	erence				As	Increase	As
Adj.	Form/			EXPLANATION OF AUDIT ADJUSTME	:N15	Reported	(Decrease)	Adjusted
No.	Sch	Line	Col.		<del>+</del>		<del></del>	
				ADJUSTMENTS TO REPORTED SD/MC UNIT COUNTY PROVIDERS - PROGRAMS 1 AND				
27 28 29 30 31 32 33 34 35	MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A	8 8A 9 9A 10 10A 10B 11 11A	Total Total Total Total Total Total Total Total	MEDI-CAL UNITS - 07/01/03 to 09/30/03 MEDI-CAL UNITS - 10/01/03 to 06/30/04 MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03 MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04 ENHANCED - CHILDREN UNITS - 07/01/03 to 09/30/03 ENHANCED - CHILDREN UNITS - 10/01/03 to 06/30/04 ENHANCED - REFUGEES UNITS - 07/01/03 to 06/30/04 HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03 HEALTHY FAMILIES - 10/01/03 to 06/30/04 TOTAL UNITS  To adjust the as settled (MH 1966A) SD/MC units of service/tic county operated facilities to agree with the State DMH Net App. Report dated March 18, 2008. (Net disallowed claims of 81,21 Copies of workpapers detailing adjustments by service function been provided to the County.	proved Claims 7 units).	1,588,354 5,002,925 143 1,489 - 37,228 - 106,676 61,794 6,798,609	60,118 (66,326) 17 4,667 18,648 (9,519) 560 (66,606) 19,913 (38,528)	1,648,472 * 4,936,599 * 160 * 6,156 * 18,648 * 27,709 * 560 * 40,070 * 81,707 * 6,760,081 *
				* Balance carried forward to subsequent adjustment.  ** Balance brought forward from prior adjustment.				

CONTRA CO: Report Refer Adj. Form/ No. Sch.  36 MH 1966A 37 MH 1966A 38 MH 1966A 39 MH 1966A 40 MH 1966A 41 MH 1966A 42 MH 1966A 42 MH 1966A 43 MH 1966A 43 MH 1966A	8 T 8A T 9 T 10 T 10A T	Col. Total Total Total Total	EXPLANATION OF AUDIT ADJUSTMENTS TO REPORTED SD/MC UNITS COUNTY PROVIDERS - PROGRAMS 1 AND 2  MEDI-CAL UNITS - 07/01/03 to 09/30/03  MEDI-CAL UNITS - 10/01/03 to 06/30/04	<u>s</u>	89 As Reported	June 30 Increase (Decrease)	As Adjusted
Adj. Form/ No. Sch.  36 MH 1966A 37 MH 1966A 38 MH 1966A 39 MH 1966A 40 MH 1966A 41 MH 1966A 41 MH 1966A 42 MH 1966A 42 MH 1966A	8 7 8A 7 9A 7 10 10A 7 10A 7	Totai Total Total	ADJUSTMENTS TO REPORTED SD/MC UNITS COUNTY PROVIDERS - PROGRAMS 1 AND 2  MEDI-CAL UNITS - 07/01/03 to 09/30/03  MEDI-CAL UNITS - 10/01/03 to 06/30/04	<u>s</u>	Reported 		Adjusted 
36 MH 1966A 37 MH 1966A 38 MH 1966A 39 MH 1966A 40 MH 1966A 41 MH 1966A 42 MH 1966A - MH 1966A	8 T 8A T 9 T 9A T 10 T	Totai Total Total	ADJUSTMENTS TO REPORTED SD/MC UNITS COUNTY PROVIDERS - PROGRAMS 1 AND 2  MEDI-CAL UNITS - 07/01/03 to 09/30/03  MEDI-CAL UNITS - 10/01/03 to 06/30/04	<u>s</u>	** 1648 472	(44.005)	
36 MH 1966A 37 MH 1966A 38 MH 1966A 39 MH 1966A 40 MH 1966A 41 MH 1966A 42 MH 1966A - MH 1966A	8 T 8A T 9 T 9A T 10 T	Totai Total Total	COUNTY PROVIDERS - PROGRAMS 1 AND 2  MEDI-CAL UNITS - 07/01/03 to 09/30/03  MEDI-CAL UNITS - 10/01/03 to 06/30/04	2	** 1 648 472	(44.005)	
	11 T 11A T	Total Total Total Total Total	MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03 MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04 ENHANCED - CHILDREN UNITS - 07/01/03 to 06/30/04 ENHANCED - CHILDREN UNITS - 10/01/03 to 06/30/04 ENHANCED - REFUGEES UNITS - 07/01/03 to 06/30/04 HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03 HEALTHY FAMILIES - 10/01/03 to 06/30/04 TOTAL UNITS  To adjust the SD/MC units of service/time per the State DMH N Claims Report to the County's records. Copies of workpapers detailing adjustments by service function been provided to the County.	let Approved	*** 4,936,599 ** 160 ** 6,156 ** 18,648 ** 27,709 ** 560 ** 40,070 ** 81,707 ** 6,760,081	(11,295) 51,636 6,732 13,747 (985) 533 (560) - (1,444) 58,364	1,637,177 * 4,988,235 * 6,892 * 19,903 * 17,663 * 28,242 * 40,070 * 80,263 * 6,818,445 *
			* Balance carried forward to subsequent adjustment.				

Provide	<del></del> _				Provider Number	No. of Adj.	Fiscal Peri	
	CONTRA CO	OSTA CO	YTNUC		00007	89	June 30	0, 2004
	Report Refe	erence				As	Increase	As
Adj.	Form/ Sch.	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	NTS 	Reported	(Decrease)	Adjusted
	1	8 8A 9 9A 10 10A 10B 11 11A	Total Total Total Total Total Total Total Total Total	ADJUSTMENTS TO REPORTED SD/MC UNIT COUNTY PROVIDERS - PROGRAMS 1 AND MEDI-CAL UNITS - 07/01/03 to 09/30/03 MEDI-CAL UNITS - 10/01/03 to 06/30/04 MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03 MEDICARE/MEDI-CAL UNITS - 10/01/03 to 09/30/04 ENHANCED - CHILDREN UNITS - 07/01/03 to 09/30/03 ENHANCED - CHILDREN UNITS - 10/01/03 to 06/30/04 ENHANCED - REFUGEES UNITS - 07/01/03 to 09/30/03 HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03 HEALTHY FAMILIES - 10/01/03 to 06/30/04 TOTAL UNITS  To adjust the County's records to account for the units of servi County adjusted out when utilizing the Disallowed Claims Syst units of service/time were excluded in the State DMH Summar Report but remained in their records.	ce/time that the em (DCS). These	** 1,637,177 ** 4,988,235 ** 6,892 ** 19,903 ** 17,663 ** 28,242 ** 40,070 ** 80,263 ** 6,818,445	(B1,006)	1,637,177 * 4,907,229 * 6,892 * 19,903 * 17,663 * 28,031 * 40,070 * 80,263 * 6,737,228 *
				* Balance carried forward to subsequent adjustment.				
				** Balance brought forward from prior adjustment.		<u> </u>		

Provide	r CONTRA CO	STA C			Provider Number 00007	No. of Adj. 89		riod Ended 30, 2004
	Report Refe					As	Increase	As
Adj. No.	Form/ Sch.	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	NTS 	Reported	(Decrease)	Adjusted
				ADJUSTMENTS TO REPORTED SD/MC UNIT COUNTY PROVIDERS - PROGRAMS 1 AND				
46 47 48 49 50 51 - 52	MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A	8 8A 9 9A 100 10A 11D 111	Total Total Total Total Total Total Total Total	MEDI-CAL UNITS - 07/01/03 to 09/30/03 MEDI-CAL UNITS - 10/01/03 to 06/30/04 MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03 MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04 ENHANCED - CHILDREN UNITS - 10/01/03 to 09/30/03 ENHANCED - CHILDREN UNITS - 10/01/03 to 06/30/04 ENHANCED - REFUGEES UNITS - 07/01/03 to 06/30/04 HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03 HEALTHY FAMILIES - 10/01/03 to 06/30/04 TOTAL UNITS  To adjust SD/MC units to incorporate the controls of the lower records or the State DMH Approved Claims Report. Copies of workpapers detailing adjustments by service function provided to the county.		1,637,177 4,907,229 6,892 19,903 17,663 28,031 440,070 480,263 6,737,228	(46) 219 (22) (250) 387 (698) - (880) (1,290)	1,637,131 * 4,907,448 * 6,870 * 19,653 * 18,050 * 27,333 * 40,070 * 79,383 * 6,735,938 *
		<u></u> _		Balance carried forward to subsequent adjustment.     Balance brought forward from prior adjustment.				

Provider	CONTRA CO				Provider Number 00007	No. of Adj. 89	Fiscal Per June 3	iod Ended 0, 2004
	Report Refe		JUN11			As	Increase	As
Adj.	Form/		Col	EXPLANATION OF AUDIT ADJUSTME	NTS	Reported	(Decrease)	Adjusted
- 53 	Form/ Sch.  MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A	8 8A 9 9A 10 10A 10B 11 11A	Total	ADJUSTMENTS TO REPORTED SD/MC UNIT COUNTY PROVIDERS - PROGRAMS 1 AND MEDI-CAL UNITS - 07/01/03 to 09/30/03 MEDI-CAL UNITS - 10/01/03 to 06/30/04 MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03 MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04 ENHANCED - CHILDREN UNITS - 07/01/03 to 06/30/04 ENHANCED - CHILDREN UNITS - 10/01/03 to 06/30/04 ENHANCED - REFUGEES UNITS - 07/01/03 to 06/30/04 HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03 HEALTHY FAMILIES - 10/01/03 to 06/30/04 TOTAL UNITS  To adjust Audited SD/MC units to incorporate the result of the findings. This audit was conducted by the State DMH Oversigh	EPSDT audit	** 1,637,131 ** 4,907,448 ** 6,870 ** 19,653 ** 18,050 ** 27,333 ** - ** 40,070 ** 79,383 ** 6,735,938	(3,459) 	1,637,131 4,903,989 6,870 19,653 18,050 27,333 - 40,070 79,383 6,732,479
				* Balance carried forward to subsequent adjustment.  ** Balance brought forward from prior adjustment.				

Provide					Provider Number	No. of Adj.	Fiscal Pen	od Ended
	CONTRA CO	OSTA CO	YTNUC		00007	89	June 30	0, 2004
	Report Refe	erence			THE	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	_Line_	Col.	EXPLANATION OF AUDIT ADJUSTME	:NIS	Nepolieu	(Decicase)	, ajusteu
				ADJUSTMENTS TO REPORTED SD/MC UNIT	<u>s</u> -			
54 55 - 56 57 58 59 60 61	MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A	8 8A 9 9A 10 10A 10B 11 11A	Total Total Total Total Total Total	MEDI-CAL UNITS - 07/01/03 to 09/30/03 MEDI-CAL UNITS - 10/01/03 to 06/30/04 MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03 MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04 ENHANCED - CHILDREN UNITS - 07/01/03 to 06/30/04 ENHANCED - CHILDREN UNITS - 10/01/03 to 06/30/04 ENHANCED - REFUGEES UNITS - 07/01/03 to 06/30/04 HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03 HEALTHY FAMILIES - 10/01/03 to 06/30/04 TOTAL UNITS  To adjust the as settled (MH 1966A) SD/MC units of service/fit county's contract providers to agree with the State DMH Appr Report dated March 18, 2008. (Net disallowed claims of 32,43 Copies of workpapers detailing adjustments by service function been provided to the County.	oved Claims 32 units).	1,597,898 6,370,796 - - 15,666 - 70,831 55,865 8,111,056	39,036 (55,868) - 235 2,479 3,013 2,660 (46,432) 26,233 (28,644)	1,636,934 * 6,314,928 * 235 * 2,479 * 18,679 * 2,660 * 24,399 * 82,098 * 8,082,412 *
	1			** Balance brought forward from prior adjustment.				

Provide	CONTRA CO		NINTV		Provider Number 00007	No. of Adj. 89	Fiscal Peri June 30	
<b> </b>	Report Refe		JUNIT			As	Increase	As
Adj.	Form/	Terrice		EXPLANATION OF AUDIT ADJUSTMEN	NTS	Reported	(Decrease)	Adjusted
		Line	Col.			L		
62 63 64 65 -	Sch.  MH 1966A  MH 1966A  MH 1966A  MH 1966A  MH 1966A  MH 1966A	8 8A 9 9A 10 10A 10B	Total Total Total Total Total	ADJUSTMENTS TO REPORTED SD/MC UNITS  CONTRACT PROVIDERS  MEDI-CAL UNITS - 07/01/03 to 09/30/03  MEDI-CAL UNITS - 10/01/03 to 06/30/04  MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03  MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04  ENHANCED - CHILDREN UNITS - 07/01/03 to 09/30/03  ENHANCED - CHILDREN UNITS - 10/01/03 to 06/30/04  ENHANCED - REFUGEES UNITS - 07/01/03 to 06/30/04	<u>1-</u>	** 1,636,934 ** 6,314,928 ** 235 ** 2,479 ** 18,679 ** 2,660	(650) 42,365 558 1,547 - 43 (2,660)	1,636,284 * 6,357,293 * 558 * 1,782 * 2,479 * 18,722 *
68	MH 1966A	11	Total	HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03		** 24,399	206	24,605 *
69	MH 1966A	11A		HEALTHY FAMILIES - 10/01/03 to 06/30/04 TOTAL UNITS  To adjust the SD/MC units of service/time per the State DMH N Claims Report to the County's records. Copies of workpapers detailing adjustments by service function been provided to the County.		** 82,098 ** 8,082,412	(150) 41,259	81,948 * 8,123,671 *
				Balance carried forward to subsequent adjustment.     Balance brought forward from prior adjustment.				

Provide	r CONTRA CO	OSTA CO	DUNTY		Provider Number 00007	No. of Adj. 89		riod Ended 30, 2004
	Report Refe					As	Increase	As
Adj. No.	Form/ Sch.	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	NTS	Reported	(Decrease)	Adjusted
				ADJUSTMENTS TO REPORTED SD/MC UNIT CONTRACT PROVIDERS	<u>s -</u>			,
70	MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A	8 8A 9 9A 10 10B 11 11A	Total Total Total Total Total Total Total Total Total	MEDI-CAL UNITS - 07/01/03 to 09/30/03 MEDI-CAL UNITS - 10/01/03 to 06/30/04 MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03 MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04 ENHANCED - CHILDREN UNITS - 07/01/03 to 09/30/03 ENHANCED - CHILDREN UNITS - 10/01/03 to 06/30/04 ENHANCED - REFUGEES UNITS - 07/01/03 to 06/30/04 HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03 HEALTHY FAMILIES - 10/01/03 to 06/30/04 TOTAL UNITS  To adjust the County's records to account for the units of servi County adjusted out when utilizing the Disallowed Claims Syst units of service/time were excluded in the State DMH Summar Report but remained in their records.	tem (DCS). These	** 1,636,284  ** 6,357,293  ** 558  ** 1,782  ** 2,479  ** 18,722  ** 24,605  ** 81,948  ** 8,123,671	(32,432)	1,636,284 * 6,324,861 * 558 * 1,782 * 2,479 * 18,722 * 24,605 * 81,948 * 8,091,239 *
	]			** Balance brought forward from prior adjustment.				

Provider	CONTRA CO	STA CO	DUNTY		Provider Number 00007	No. of Adj. 89	Fiscal Peri June 30	
	Report Refe					As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	NIS 	Reported	(Decrease)	
				ADJUSTMENTS TO REPORTED SD/MC UNITS  CONTRACT PROVIDERS	<u>.</u>			
71 72 73 74 75	MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A MH 1966A	8 8A 9 9A 10 10A 10B 11 11A	Total Total Total Total Total Total Total Total Total	MEDI-CAL UNITS - 07/01/03 to 09/30/03 MEDI-CAL UNITS - 10/01/03 to 06/30/04 MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03 MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04 ENHANCED - CHILDREN UNITS - 07/01/03 to 09/30/03 ENHANCED - CHILDREN UNITS - 10/01/03 to 06/30/04 ENHANCED - REFUGEES UNITS - 07/01/03 to 06/30/04 HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03 HEALTHY FAMILIES - 10/01/03 to 06/30/04 TOTAL UNITS  To adjust SD/MC units to incorporate the controls of the lower records or the State DMH Approved Claims Report. Copies of workpapers detailing adjustments by service function provided to the county.		1.636,284 6,324,861 758 758 71,782 72,479 718,722 719 724,605 7381,948 7388 7488 7588 7588 7588 7588 7588 7588 75	(2,423) (26,880) - - (632) - (215) (630) (30,780)	1,633,861 6,297,981 558 1,782 2,479 18,090 - 24,390 81,318 8,060,459
			<u> </u>	* Balance carried forward to subsequent adjustment.     ** Balance brought forward from prior adjustment.		<u> </u>		

Provider	CONTRA CO	OSTA C	OUNTY		Provider Number 00007	No. of Adj. 89		eriod Ended 30, 2004	
	Report Ref				-	As	Increase	As	
Adj. No.	Form/ Sch.	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	NTS	Reported	(Decrease)	Adjusted	
76 77 78 79	MH 1968 MH 1968 MH 1968 MH 1968 MH 1968	28 28A 28 28A	E E K K	PATIENT AND OTHER PAYOR REVENUE - I/P (10/01/03/03/03/04/03/04/03/04/03/04/03/04/03/04/03/04/03/04/04/04/04/04/04/04/04/04/04/04/04/04/	3 - 09/30/03) 3 - 06/30/04) 3 - 09/30/03) 3 - 06/30/04)	\$ 31,306 \$ 107,697 \$ - \$ -	\$ 110,605 \$ 1,447,414 \$ 16,538 \$ 50,565	\$ 141,911 \$ 1,555,111 \$ 16,538 \$ 50,565	
				ADJUSTMENTS TO PATIENT AND OTHER PAYOR REVENUE - CONTRACT PROVIDER					
80 81	MH 1968 MH 1968	28 28A	KK		3 - 09/30/03) 3 - 06/30/04) punty's records. ower of Medi/Medi	\$ - \$ -	\$ 5,176 \$ 1,836	\$ 5,176 \$ 1,836	
				* Balance carried forward to subsequent adjustment.  ** Balance brought forward from prior adjustment.					

Provide	CONTRA CO	OSTA CO	YTNUC		Provider Number 00007	No. of Adj. 89		eriod Ended 30, 2004
	Report Refe	erence				As	Increase	As
Adj. No.	Form/ Sch.	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	NTS 	Reported	(Decrease)	Adjusted
				ADJUSTMENTS TO REPORTED SETTLEME!				
82	MH 1979	2	D	CONTRACT PROVIDER MEDI-CAL DIRECT SERVICE GROSS F  To adjust reported Contract Provider Direct Medi-Cal Gross R as a result of adjustments to the contract providers SD/MC un service/time.	eimbursement	\$ 20,302,019	\$ (144,836)	\$ 20,157,183
83 84	MH 1979 MH 1979	21 27	J	TOTAL SD/MC REIMBURSEMENT (FFP) - COUNTY TOTAL HEALTHY FAMILIES REIMBURSEMENT (FFP) - COUNT TOTAL REIMBURSEMENT - COUNTY	Y	\$ 19,790,826 305,872 \$ 20,096,698	\$ (721,228) (83,273) \$ (804,501)	\$ 19,069,598 222,599 \$ 19,292,198 *
85 86	Sch. 3b Sch. 3b	Total Total	24 25	TOTAL SD/MC REIMBURSEMENT (FFP) - CONTRACT PROVIDING TOTAL HEALTHY FAMILIES REIMBURSEMENT (FFP) - CONTRACT PROVIDERS  TOTAL REIMBURSEMENT - CONTRACT PROVIDERS  To adjust Total SD/MC Reimbursement (FFP) due to the adjust reported costs and units.	ACT PROVIDERS	\$ 10,819,205 \$ 186,597 \$ 11,005,802	\$ (73,635) \$ (29,706) \$ (103,341)	\$ 10,745,570 \$ 156,891 \$ 10,902,461 *
87	Sch. 2a	55	3	TOTAL SD/MC REIMBURSEMENT (FFP) - COUNTY  To incorporate the Quality Assurance Review results (report d February 13, 2006).	ated	** \$ 19,292,198	\$ (137,929)	\$ 19,154,269
				Balance camed forward to subsequent adjustment.     Balance brought forward from prior adjustment.			<u></u>	

Provider	CONTRA CO	OSTA CO	DUNTY		Provider Number 00007	No. of Adj. 89		eriod Ended 30, 2004
	Report Refe					As	Increase	As
Adj. No.	Form/	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	NTS	Reported	(Decrease)	Adjusted
				ADJUSTMENTS TO REPORTED SETTLEMEN	<u>1T</u>			
88	Sch. 3b	Total	28	TOTAL REIMBURSEMENT - CONTRACT PROVIDERS  To adjust Total SD/MC Reimbursement (FFP) due to the limit Maximum.	of FFP Contract	** \$ 10,902,461	\$ (322,291)	\$ 10,580,170
				Family Service Agency of Marin Moss Reach Homes, Inc North Valley School Charis Youth Center Child Therapy Inst of Marin West Coast Children's Center Jewish Family & Children's Svs The Family Institude of Pinole Touchstone Counseling Service Porti Bell Hume Behavioral HI Children's Hospital Oakland Pine Tree Gardens Bay Area Psychotherapy Service Family Service of San Leandro Pacific Cnt for Human Growth A Better Way Hiawatha Harris, Inc Family and Child Counseling Center YWCA of Contra Costa Rubino Counseling Services Discovery Counseling Center The Lucas Center TOTAL	(485) (36,124) (14,008) (658) (6,532) (14,364) (18,298) (81,159) (13,863) (2,666) (33) (14,160) (56,295) (43) (1) (352) (388) (11,182) (28,280) (4,689) (4,339) (14,372) (322,291)			
				* Balance carried forward to subsequent adjustment.     ** Balance brought forward from prior adjustment.			L	

Provider					Provider Number 00007	No. of Adj. 89		eriod Ended 30, 2004
<u> </u>	CONTRA CO Report Ref		JUNIT			As	Increase	As
Adj. No.	Form/ Sch.	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	NTS	Reported	(Decrease)	Adjusted
				ADJUSTMENTS TO REPORTED EPSDT STATE GENERAL FUND SETTLEMENT				
89	Sch. 4	8	3	TOTAL EPSDT SGF		\$ 9,933,835	\$ (56,109)	\$ 9,877,726
				To adjust the final EPSDT settlement as a result of adjustmen Medi-Cal cost.	ts to audited			
						:		
						,		
				<ul> <li>* Balance carried forward to subsequent adjustment.</li> <li>** Balance brought forward from prior adjustment.</li> </ul>				

#### FINDING 1 - MENTAL HEALTH EXPENDITURES

Our review disclosed that the County's methodology of reporting Mental Health Expenditures, MH 1960, In. 1, col. 3 was net of Other and Medi-Cal adjustments and other reconciling items. This has been the County's methodology in the past and currently.

The County was not in compliance with the cost report instructions for MH 1960, In. 1, col. 3 wherein it states in part that County legal entities should report the total gross expenditures for the county mental health department or division from the county auditor-controller's report. It also states that the reported amount on line 1, column 3 should match the total on the summary page of the auditor-controller's report, or the county should maintain workpapers that reconcile the amount reported on line 1, column 3 to the auditor-controller's report.

For this year, the County has prepared and provided a reconciliation workpaper dated 04/25/08.

#### **AUDIT AUTHORITY**:

HCFA Pub. 15-I, Section 2304

#### **RECOMMENDATION:**

We recommend that the County comply with the cost report instructions and exercise due care in the preparation of the cost report. All workpapers utilized in the preparation of the cost report must be properly filed and kept to facilitate the audit.

#### AUDITEE'S RESPONSE:

Concur.

#### FINDING 2 - HOSPITAL ADMINISTRATIVE DAYS COST & RATE

The review of the County's workpaper and MH 1966A, Mode 05, SFC's 10 and 19 disclosed that the County was not in compliance with DMH Letter 92-05 for this FY. It states that the Administrative days, Mode 05, SFC 19 costs per unit should be the same as those in the Acute Care, Mode 05, SFC 10. Therefore, the costs per unit for 05/19 and 05/10 will be adjusted by dividing the audited gross costs by the sum of the audited total units.

#### **AUDIT AUTHORITY:**

DMH Letter No. 92-05 and No. 02-04 (K); CFRS instruction manual FY 03-04 page 78.

#### **RECOMMENDATION:**

We recommended that the County review and comply with the above cited authorities and excise due care in the preparation of the cost report.

#### **AUDITEE'S RESPONSE**:

Concur.

#### FINDING 3 - REPORTING MAA EXPENSES AND IMPLEMENTATION OF MAA PLAN

During the review of MAA expenses, we have noted that the County reported several staffs with unrealistic activity hours. Individual activity logs were also reviewed and reconciled with MAA expense reports. Material discrepancies between these two documentations were found. It might be due to incorrect data entry, report generator errors, or incorrect data manipulation.

Review of the MAA Plan and Activity Reports also reveals that the County assigned SPMP staffs to perform activities that SPMP was not planned for, such as MFCC and Psychologist were performing code 601 – 609 non-SPMP activities.

#### **AUDIT AUTHORITY:**

DMH Letter No. 03-05.

#### **RECOMMENDATION:**

We recommend that the County follow instructions per the DMH Letter No. 03-05, Cost Report Policy dated October 3, 2003, Under Section II L, when reporting the MAA program costs.

In addition, under the cost report instruction, MAA costs reported in the cost report must be based on actual staff time captured at the service function level.

Furthermore, overall MAA program controller or manager need to follow the MAA plan and only allowed approved position and amount of employees to work for the appropriate MAA plan assignments.

#### AUDITEE'S RESPONSE:

Concur.

#### FINDING 4 - FFP CONTRACT MAXIMUM

Several county's contract providers have its FFP contract maximum less than its FFP reimbursable cost.

#### **AUDIT AUTHORITY:**

Various provider contracts.

#### RECOMMENDATION:

Since final reimbursement is determined by taking the lower of FFP contract maximum and the FFP reimbursable cost, we recommend that the County review the maximum payable amount in its provider contracts and make necessary amendments so the maximum amount payable under the contract does not fall below reimbursable cost.

#### **AUDITEE'S RESPONSE:**

We are taking the position that the payments in question are proper & duly authorized in accordance with County policies, Resolution No. 2001\72, item 13, which authorized the Health Services Department to purchase Professional Medical Services based upon a specified fee schedule without going thru the Purchasing Department/Agent. In addition, the existing internal controls in the County's Auditor-Controller's office as it pertains to disbursements assure us that proper Board of Supervisors authorization exists.

#### CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

#### **DEPARTMENT OF MENTAL HEALTH**

### CALCULATION OF PROGRAM COSTS MH 1960 (08/04)

**FISCAL YEAR 2003 - 2004** 

County: CONTRA COSTA COUNTY

	Legal Entity: CONTRA COSTA COUNTY	Α	В	С
Le	gal Entity Number: 00007	Salaries		Total
		and Benefits	Other	Costs
1	Mental Health Expenditures	38,422,876	66,654,672	105,077,548
2	Encumbrances			
3	Less: Payments to Contract Providers (County Only)		(36,782,456)	(36,782,456)
4	Other Adjustments from MH 1962	185,173	335,407	520,580
5	Total Costs Before Medi-Cal Adjustments	38,608,049	30,207,623	68,815,672
6_	Medi-Cal Adjustments from MH 1961		(181,865)	(181,865)
7	Managed Care Consolidation (County Only)			
8	Allowable Costs for Allocation			68,633,807
	Administrative Costs (County Only)			
9	SD/MC Administration			7,478,316
10	Healthy Families Administration			66,046
11	Non-SD/MC Administration			4,400,249
12	Total Administrative Costs			11,944,611
	Utilization Review Costs (County Only)			
13	Skilled Professional Medical Personnel			140,652
14	Other SD/MC Utilization Review			932,925
15	Non-SD/MC Utilization Review			587,124
16	Total Utilization Review Costs			1,660,701
17	Research and Evaluation (County Only)			
18	Mode Costs (Direct Service and MAA)			55,028,495
19	Total Costs - Lines 9 through 18			68,633,807

#### CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY MEDI-CAL ADJUSTMENTS TO COSTS MH 1961 (08/04)

#### **DEPARTMENT OF MENTAL HEALTH**

FISCAL YEAR 2003 - 2004

County: CONTRA COSTA COUNTY

Legal Entity: CONTRA COSTA COUNTY	A	В	C
Legal Entity Number: 00007	Salaries	_	Total
	and Benefits	Other	Adjustments
1 Disallowance of MAA Cost		(181,865)	(181,865)
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20 Total Adjustments		(181,865)	(181,865)

### CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY OTHER ADJUSTMENTS MH 1962 (08/04)

#### **DEPARTMENT OF MENTAL HEALTH**

FISCAL YEAR 2003 - 2004

County: CONTRA COSTA COUNTY

Legal Entity: CONTRA COSTA COUNTY	A	В	С
Legal Entity Number: 00007	Salaries		Total
	and Benefits	Other	Adjustments
1 Calworks Cost	185,173	95,565	280,738
2 Adjustment for A-87		239,842	239,842
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20 Total Adjustments	185,173	335,407	520,580

# CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY ALLOCATION OF COSTS TO MODES OF SERVICE MH 1964 (08/04)

#### DEPARTMENT OF MENTAL HEALTH

FISCAL YEAR 2003 - 2004

County: CONTRA COSTA COUNTY

	Legal Entity: CONTRA COSTA COUNTY	A
Lε	gal Entity Number: 00007	Total
		Costs
1	Mode Costs (Direct Service and MAA) from MH 1960	55,028,495
	Modes	
2	Hospital Inpatient Services (Mode 05-SFC 10-19)	19,144,595
3	Other 24 Hour Services (Mode 05-All Other SFC)	
4	Day Services (Mode 10)	5,476,504
5	Outpatient Services (Mode 15 Program 1 + Program 2)	28,266,385
6	Outreach Services (Mode 45)	1,243,282
7	Medi-Cal Administrative Activities (Mode 55)	897,729
8	Support Services (Mode 60)	
9	Total - Lines 2 through 8	55,028,495

DEPARTMENT OF MENTAL HEALTH PAGE 1 OF 1

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL MH 1966 (08/04)

DETAIL COST REPORT

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FISCAL YEAR 2003 - 2004

County: CONTRA COSTA COUNTY County Code: 07

1.0	Legal Entity: CONTRA COSTA COUNTY egal Entity Number: 00007		A	B Service	C Service	D Service	Service	F Service	G Service
Le	Mode: 05 - Hospital Inpatient (SFC 10-	Mode Total	Function	Function	Function	Function	Function	Function	
	Widde, 05 - Hospital Inpatient (Si C 10	13)	I WIOGE TOTAL	10	19	Function	Tunction	Function	Functio
1	Allocation Percentage		100.00%	89.36%	10.64%			_	
2	Total Units		100.007	13,120	1,562				
3	Gross Cost		19,144,595	17,107,825	2,036,770				
- ; - ; - 4	Cost per Unit			1,303.95	1,303.95		00000000000	100000000000000000000000000000000000000	
5	SMA per Unit			873.40	236.78				<del></del>
<u>5</u> _	Published Charge per Unit			1,550.00	1,550.00			_	
7	Negotiated Rate / Cost per Unit			1,000.00	1,000.00				
							*.*.*.*.*.*.	212121212121212121212	
8	Medi-Cal Units	07/01/03 - 09/30/03		1,530	265				
8A		10/01/03 - 06/30/04		4,541	877				
9 9A	Medicare/Medi-Cal Crossover Units	07/01/03 - 09/30/03 10/01/03 - 06/30/04		140 1,450	<del></del>				
10		07/01/03 - 09/30/03		1,430_				_	
10A	Enhanced SD/MC (Children) Units	10/01/03 - 06/30/04							
	Enhanced SD/MC (Refugees) Units	07/01/03 - 06/30/04							
11		07/01/03 - 09/30/03						_	
11A	Healthy Families (SED) Units	10/01/03 - 06/30/04				-		_	
12	Non-Medi-Cal Units	1.5.57700 00,00004		. 5,459	420				
-1:5		107/04/02 00/00/02	2444.704	000000000				*************	
13 13A	Medi-Cal Costs *	07/01/03 - 09/30/03 10/01/03 - 06/30/04	2,111,704 6,307,415	1,995,044 5,921,237	116,661 386,178				
13A 14		07/01/03 - 09/30/03	1,452,963	1,336,302	116,661				
14A	Medi-Cal SMA Upper Limits	10/01/03 - 06/30/04	4,352,288	3,966,109	386,178				
15		07/01/03 - 09/30/03	2,488,161	2,371,500	116,661				
15A	Medi-Cal Published Charges *	10/01/03 - 06/30/04	7,424,728	7,038,550	386,178				_
16	Madi Califa at at Bata	07/01/03 - 09/30/03	.,,	.,,	222,122				
6A	Medi-Cal Negotiated Rates	10/01/03 - 06/30/04							
7	and Control of the second of t	07/01/03 - 09/30/03	182,553	182,553			. * . * . * . * . * . * . * . * . * . *	<u> en roeleven neger</u> ene.	
7A	Medicare/Medi-Cal Crossover Costs	10/01/03 - 06/30/04	1,890,728	1,890,728					
8		07/01/03 - 09/30/03	122,276	122,276					
8A	Medicare/Medi-Cal Crossover SMA Upper Limits	10/01/03 - 06/30/04	1,266,430	1,266,430				_	
9		07/01/03 - 09/30/03	217,000	217,000					
9A	Medicare/Medi-Cal Crossover Published Charges	10/01/03 - 06/30/04	2,247,500	2,247,500					
20	Madinara (Madi Cal Consequer Nagatioted Dates	07/01/03 - 09/30/03							
20A	Medicare/Medi-Cal Crossover Negotiated Rates	10/01/03 - 06/30/04							
21		07/01/03 - 09/30/03	000000000					eleteta ot <u>alo</u> ste	<u> व्यवस्थान</u> स्
1A	Enhanced SD/MC (Children) Costs	10/01/03 - 06/30/04							
2		07/01/03 - 09/30/03	<del></del>						
2A	Enhanced SD/MC (Children) SMA Upper Limits	10/01/03 - 06/30/04				i			
3		07/01/03 - 09/30/03		-	1				
3A	Enhanced SD/MC (Children) Published Charges	10/01/03 - 06/30/04							
4	Embanand CD/MC (Children) Nametical - 1 Coto-	07/01/03 - 09/30/03							
4A	Enhanced SD/MC (Children) Negotiated Rates	10/01/03 - 06/30/04							
5	Enhanced SD/MC (Refugees) Costs	07/01/03 - 06/30/04		************		***************	*************		enta ventatus <u>ie</u>
	, , ,	07/01/03 - 06/30/04			-		-		
	, , ,	07/01/03 - 06/30/04		+		-	1	-	
	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/03 - 06/30/04							
				2000000000		7			
9	Healthy Families Costs	07/01/03 - 09/30/03							
9A		10/01/03 - 06/30/04							
0	Healthy Families SMA Upper Limits	07/01/03 - 09/30/03							
0A	· · · · · · · · · · · · · · · · · · ·	10/01/03 - 06/30/04							
1 1A	Healthy Families Published Charges	07/01/03 - 09/30/03						-	
		10/01/03 - 06/30/04							
2 2A	Healthy Families Negotiated Rates	07/01/03 - 09/30/03 10/01/03 - 06/30/04		+					
	<del>Tarana ang jarana ana ana ana ana ana ana ana ana an</del>	10/01/03 - 00/30/04							
2 (	Non-Medi-Cal Costs	8,652,195	7,118,263	1,533,931		ŀ			

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL MH 1966 (08/04)

DETAIL COST REPORT

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FISCAL YEAR 2003 - 2004

County: CONTRA COSTA COUNTY County Code: 07

Leg	Legal Entity: CONTRA COSTA COUNTY al Entity Number: 00007		Α	B Service	C Service	D Service	E Service	F Service	G Servic
	Mode: 10 - Day Services		Mode Total	Function 20	Function 81	Function 85	Function_	Function	Functio
1	Allocation Percentage		100.00%		8.06%	34.77%		<del>                                     </del>	
	Total Units			36,484	3,372	10,361	-		
3	Gross Cost		5,476,504	3,131,286	441,219	1,903,999			
7	Cost per Unit	0000000000000000000		85.83	130.85	183.77	<u> </u>		
	SMA per Unit			85.68	130.63	183.46			<u> </u>
	Published Charge per Unit	<del></del>		100.54	153.28	215.27		<del>                                     </del>	<del> </del>
	Negotiated Rate / Cost per Unit	<del></del>		100.34	133.20	213.21		<del> </del>	
77.77	<u>and the Francisco Committee of Committee of</u>	<u>aa</u> assaa gymaaaaags		dag Marana	<del>galaria, iga</del> a	\$2.4.4.4.4 <u>5</u> 7.4.4.4.4.4		and and and and	100000000000000000000000000000000000000
8_	Medi-Cal Units	07/01/03 - 09/30/03		3,573	<u>852</u>	2,388			
8A		10/01/03 - 06/30/04		11,183	1,938	5,532			
9	Medicare/Medi-Cal Crossover Units	07/01/03 - 09/30/03		109			<u> </u>		
9A		10/01/03 - 06/30/04		346				L	
10	Enhanced SD/MC (Children) Units	07/01/03 - 09/30/03				252			
TUA		10/01/03 - 06/30/04				1,532			
	Enhanced SD/MC (Refugees) Units	07/01/03 - 06/30/04		-					
11 H	Healthy Families (SED) Units	07/01/03 - 09/30/03		<del></del>		——— <u>—</u>			
11A	Non Modi Cal Linits	10/01/03 - 06/30/04		24 272	500				
12	Non-Medi-Cal Units	garani algaran <u>asisa</u>		21,273	582	657	gggisteretelegggegel	gajarana gajajana ata	and this is
13	Medi-Cal Costs	07/01/03 - 09/30/03	856,973	306,657	111,482	438,833			
13A	vicur-oai gosts	10/01/03 - 06/30/04	2,229,972	959,795	253,583	1,016,593			
14	Medi-Cal SMA Upper Limits	07/01/03 - 09/30/03	855,534	306,135	111,297	438,102			
14A	wedi-Cai SiviA Opper Limits	10/01/03 - 06/30/04	2,226,221	958,159	253,161	1,014,901			
15	Medi-Cal Published Charges	07/01/03 - 09/30/03	1,003,889	359,229	130,595	514,065			
15A		10/01/03 - 06/30/04	2,612,269	1,124,339	297,057	1,190,874			
16	Medi-Cal Negotiated Rates	07/01/03 - 09/30/03							
16A		10/01/03 - 06/30/04							
17	4.50.00	07/01/03 - 09/30/03	9,355	9,355					
17A	Medicare/Medi-Cal Crossover Costs	10/01/03 - 06/30/04	29,696	29,696					
10	4-41	07/01/03 - 09/30/03	9,339	9,339					
18A	Medicare/Medi-Cal Crossover SMA Upper Limits	10/01/03 - 06/30/04	29,645	29,645			_	_	
19	Andiana Madi Cal Canana and Bublished Charens	07/01/03 - 09/30/03	10,959	10,959					
19A "	Medicare/Medi-Cal Crossover Published Charges	10/01/03 - 06/30/04	34,787	34,787					
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/03 - 09/30/03						_	
20A "	redicare/medi-Cai Crossover Negotiated Rates	10/01/03 - 06/30/04							
21 _		07/01/03 - 09/30/03	46,309		<u> </u>	46.309		<u>alabatatatatata</u>	
21A E	Enhanced SD/MC Costs	10/01/03 - 06/30/04	281,529						
22		07/01/03 - 09/30/03	46,232		<del>-                                    </del>	281,529 46,232			
22A E	nhanced SD/MC SMA Upper Limits	10/01/03 - 06/30/04	281,061	+		281,061			
2		07/01/03 - 09/30/03	54,248			54,248		<del></del>	
3A E	Inhanced SD/MC Published Charges	10/01/03 - 06/30/04	329,794	<del></del> +	<del></del>	329,794			
A		07/01/03 - 09/30/03	020,104	<del></del>		323,134		<del></del>	
4A E	nhanced SD/MC Negotiated Rates	10/01/03 - 06/30/04	<del></del>	+					
5 E	nhanced SD/MC (Refugees) Costs	07/01/03 - 06/30/04		<u></u>	70-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	4740,000,000,000	<del>arang aran</del>	HIND TO THE OWNER.	<u> </u>
		07/01/03 - 06/30/04							
		07/01/03 - 06/30/04					<del></del>		
		07/01/03 - 06/30/04							
224.2	<u>ĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸ</u>		<u> </u>	50000 <u>000</u> 200	addere Edda				<u>andasian</u>
9 9A	lealthy Families Costs	07/01/03 - 09/30/03 10/01/03 - 06/30/04		-					
0		07/01/03 - 09/30/03		+					
OA H	lealthy Families SMA Upper Limits	10/01/03 - 06/30/04		<del>+</del>				<del></del>	
1		07/01/03 - 09/30/03		<del></del>				<del></del>	
H	lealthy Families Published Charges	10/01/03 - 06/30/04	<del></del>						
12		07/01/03 - 09/30/03			+	+			_
ZA H	lealthy Families Negotiated Rates	10/01/03 - 06/30/04					1		

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL MH 1966 (08/04)

#### DETAIL COST REPORT

FISCAL YEAR 2003 - 2004

County: CONTRA COSTA COUNTY
County Code: 07

	County: CONTRA COSTA COUNTY County Code: 07			CR	CR	CR	CR	CAW	
	Legal Entity: CONTRA COSTA COUNTY	А	В	С	D	E	F	G	
Le	gal Entity Number: 00007			Service	Service	Service	Service	Service	Service
	Mode: 15 - Outpatient (Program 1)		Mode Total	Function	Function	Function	Function	Function	Function
				01	10	60	70	30	
1_	Allocation Percentage		100.00%	8.25%	48.33%	34.79%	7.63%	0.99%	
2	Total Units			1,215,291	5,517,963	2,136,914	582,456	113,902	
3	Gross Cost		28,266,385	2,332,919	13,661,346	9,833,544	2,157,838	280,738	
4	Cost per Unit			1.92	2.48	4.60	3.70	2.46	<u> </u>
5	SMA per Unit			1.83	2.36	4.37	3.52	2.36	
6	Published Charge per Unit			2.14	2.76	5.13	4.13	2.76	
7	Negotiated Rate / Cost per Unit								
									<u>•;/;-;•,•,•,</u> ,•,,•,
8	Medi-Cal Units	07/01/03 - 09/30/03		210,897	1,014,597	317,814	85,215		
8A		10/01/03 - 06/30/04		612,805	3,100,774	964,194	202,145		
9	Medicare/Medi-Cal Crossover Units	07/01/03 - 09/30/03			961	3,780	1,880		
9A		10/01/03 - 06/30/04		60	3,352	9,900	4,545		
10	Enhanced SD/MC (Children) Units	07/01/03 - 09/30/03			15,398	2,400		_	
10A		10/01/03 - 06/30/04		1,171	18,085	6,415	130		
10B	Enhanced SD/MC (Refugees) Units	07/01/03 - 06/30/04							
11	Healthy Families (SED) Units	07/01/03 - 09/30/03		4,283	34,927	800	60		
11A	ricality ratifics (SED) Utilis	10/01/03 - 06/30/04		7,860	67,054	3,406	1,063		
12	Non-Medi-Cal Units			378,215	1,262,815	828,205	287,418	113,902	
4.2		07/04/02 00/20/02	4.004.070	404,846	2.514.024	4.400.504	245.000	<u> </u>	111111111111111111111111111111111111111
13	Medi-Cal Costs	07/01/03 - 09/30/03	4,694,979		2,511,934	1,462,501	315,698		
13A		10/01/03 - 06/30/04	14,039,116	1,176,364	7,676,881	4,436,980	748,891		
14	Medi-Cal SMA Upper Limits	07/01/03 - 09/30/03	4,469,194	385,942	2,394,449	1,388,847	299,957		
14A		10/01/03 - 06/30/04	13,364,338	1,121,433	7,317,827	4,213,528	711,550		
15	Medi-Cal Published Charges	07/01/03 - 09/30/03	5,233,931	451,320	2,800,288	1,630,386	351,938		
15A		10/01/03 - 06/30/04	15,650,713	1,311,403	8,558,136	4,946,315	834,859		
16	Medi-Cal Negotiated Rates	07/01/03 - 09/30/03							
16A		10/01/03 - 06/30/04							
17	<u>agen ta </u>	07/01/03 - 09/30/03	26.739		2.379	17,395	6.965		
17A	Medicare/Medi-Cal Crossover Costs	10/01/03 - 06/30/04	70,809	115	8,299	45,557	16,838		
18		07/01/03 - 09/30/03	25,404	——···• (	2,268	16,519	6,618	+	
18A	Medicare/Medi-Cal Crossover SMA Upper Limits	10/01/03 - 06/30/04	67,282	110	7,911	43,263	15,998		
19		07/01/03 - 09/30/03	29,808	- 110	2,652	19,391	7,764	-	
19A	Medicare/Medi-Cal Crossover Published Charges	10/01/03 - 06/30/04	78,938	128	9,252	50,787	18,771		
20	<del></del>	07/01/03 - 09/30/03	70,330	120	- J,ZJZ	30,707	,0,771		
20A	Medicare/Medi-Cal Crossover Negotiated Rates	10/01/03 - 06/30/04		+	<del></del>			-	
41414E		epingeraland <mark>del</mark> agagagan			*************	25151515151515151515151	ajajajajajalalalajaja		
21	Enhanced SD/MC Costs	07/01/03 - 09/30/03	49,166		38,122	11,044			
21A	Emiliation Oblivio Costs	10/01/03 - 06/30/04	77,024	2,248	44,775	29,520	482		
22	Enhanced SD/MC SMA Upper Limits	07/01/03 - 09/30/03	46,827		36,339	10,488		[	
22A	Cimanoso Sorvio Sivia Opper Limits	10/01/03 - 06/30/04	73,315	2,143	42,681	28,034	458		
23	Enhanced SD/MC Bublished Charges	07/01/03 - 09/30/03	54,810		42,498	12,312			
23A	Enhanced SD/MC Published Charges	10/01/03 - 06/30/04	85,866	2,506	49,915	32,909	537		
24	E-LI CD MAC No	07/01/03 - 09/30/03	,						_
24A	Enhanced SD/MC Negotiated Rates	10/01/03 - 06/30/04	<u> </u>	1					
	CDMO (D. f	<u>anganat bibangilikanili</u> ga			************				
	Enhanced SD/MC (Refugees) Costs	07/01/03 - 06/30/04							
	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/03 - 06/30/04							
-	Enhanced SD/MC (Refugees) Published Charges	07/01/03 - 06/30/04							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/03 - 06/30/04					.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		.,.,.,.,.
29	the many the same of the same	07/01/03 - 09/30/03	98,598	8,222	86,472	3,681	222		
29A	Healthy Families Costs	10/01/03 - 06/30/04	200,712	15,088	166,012	15,674	3,938	-	
20		07/01/03 - 09/30/03	93,973	7,838	82,428	3,496	211		
30A	Healthy Families SMA Upper Limits	10/01/03 - 06/30/04	191,257	14,384	158,247	14,884	3,742		
24		07/01/03 - 09/30/03	109,916	9,166	96,399	4,104	248		
31A	Healthy Families Published Charges	10/01/03 - 06/30/04	223,752	16,820	185,069	17,473	4,390		
31A	<del></del>	07/01/03 - 09/30/03	223,152	10,020	100,009	11,413	4,550		
32A	Healthy Families Negotiated Rates	10/01/03 - 06/30/04			<del>+</del>			-+	
	, en	10/01/03 - 00/30/04	<u> </u>		10.00.000.000			201 201 201 201 201 201	<u> </u>
33	Non-Medi-Cal Costs		9,009,242	726,036	3,126,471	3,811,192	1,064,804	280,738	

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH PAGE 1 OF 1

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL MH 1966 (08/04)

DETAIL COST REPORT

FISCAL YEAR 2003 - 2004

County: CONTRA COSTA COUNTY County Code: 07

CR CR

Legal Entity: CONTRA COSTA COUNTY
Legal Entity Number: 00007
Mode: 45 - Outreach В D G Α Service Service Service Service Service Service Function Mode Total Function Function Function Function Function 10 20 Allocation Percentage Total Units 33.72% 2,541 100.00% 66.28% 5,006 Gross Cost 1,243,282 419,279 824,003 Cost per Unit 165.01 164.60 Non-Medi-Cal Units 2,541 5,006 Non-Medi-Cal Costs 419,279 1,243,282 824,003

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH PAGE 1 OF 1

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL MH 1966 (08/04)

DETAIL COST REPORT

FISCAL YEAR 2003 - 2004

County: CONTRA COSTA COUNTY County Code: 07

MAA MAA MAA Legal Entity: CONTRA COSTA COUNTY G Α Legal Entity Number: 00007

Mode: 55 - Medi-Cal Administrative Activities Service Service Service Service Service Service Mode Total Function Function Function Function Function Function 01 11 24 Allocation Percentage 100.00% 39.39% 49.68% 10,93% 2 Total Units 176,041 707,362 500,950 Total Expenditures 897,729 98,156 353,593 445,980 4 Cost per Unit 0.50 0.89 0.56 5 Non-Medi-Cal Costs 323,767

I \Audits\MG\Contra Costa\_As Audited 03-04 Cost Report XLS MH1966\_MODE55 and the state of t

Leg	County: CONTRA COSTA COUNTY County Code: 07												
Lec					REIMBURS	EMENT TYPE	SMA		SMA			Costs	
Lec	Legal Entity: CONTRA COSTA COUNTY gal Entity Number: 00007		Α	В	C	D	E	F	G_	Н		J	K
	Jai Endry Number: 00007		┪	Mode 55		Total	Total Inpatient				Total Outpatient	ļ	Total Outpatient
1				S. F.'s 11-19,		MAA	Mode 05-	Mode 05-All		Mode 15	Exclude	Mode 15	(Col. 1 + Col J)
1	W. f. O. ( O. w)	07/01/03 - 09/30/03	S. F.'s 01-09	31-39	S.F.'s 21-29		Hospital 2,111,704	Other	Mode 10 856,973	Program (1) 4,694,979	Program (2) 5,551,952	Program (2)	5,551,952
1A	Medi-Cal Costs	10/01/03 - 06/30/04					6,307,415		2,229,972	14,039,116	16,269,088		16,269,088
2	Medi-Cal SMA	07/01/03 - 09/30/03 10/01/03 - 06/30/04					1,452,963		855,534	4,469,194	5,324,728		5,324,728
2A 3	Medi Cel B C	07/01/03 - 09/30/03					4,352,288 2,488,161		2,226,221 1,003,889	13,364,338 5,233,931	15,590,559 6,237,820		15,590,559 6,237,820
3A	Medi-Cal P C	10/01/03 - 06/30/04					7,424,728		2,612,269	15,650,713	18,262,982		18,262,982
4 4A	Medi-Cal N R.	07/01/03 - 09/30/03 10/01/03 - 06/30/04									<u> </u>		
<u>-</u>	**************************************												
5A	Medi-Cal Gross Reimbursement	07/01/03 - 09/30/03 10/01/03 - 06/30/04					1,452,963 4,352,288		855,534 2,226,221	4,469,194 13,364,338	5,324,728 15,590,559	<b> </b>	5,324,728 15,590,559
6		07/01/03 - 09/30/03					182,553		9,355	26,739	36,094	and the state of t	36,094
6A_	Medicare/Medi-Cal Crossover Cost	10/01/03 - 06/30/04					1,890,728	+	29,696	70,809	100,505		100,50
7	Medicare/Medi-Cal Crossover SMA	07/01/03 - 09/30/03					122,276		9,339	25,404	34,743		34,743
7A 8	<del> </del>	10/01/03 - 06/30/04 07/01/03 - 09/30/03					1,266,430 217,000		29,645 10,959	67,282 29,808	96,927 40,767	i eleterateleletet paja	96,927 40,767
8A	Medicare/Medi-Cal Crossover P. C.	10/01/03 - 06/30/04					2,247,500		34,787	78,938	113,725		113,725
9	Medicare/Medi-Cal Crossover N. R.	07/01/03 - 09/30/03											
9A	. 2000000000000000000000000000000000000	10/01/03 - 06/30/04					2010000000000	ionaliamen.		3010000000000	100000000000		
10 10A	Medicare/Medi-Cal Crossover Gross Reim	07/01/03 - 09/30/03 10/01/03 - 06/30/04					122,276 1,266,430		9,339 29,645	25,404 67,282	34,743 96,927		34,743
			4						A. T		<u>;::-:-::::::::::::::::::::::::::::::::</u>		96,927
11 11A	Total SD/MC + Crossover Gross Reim.	07/01/03 - 09/30/03 10/01/03 - 06/30/04					1,575,239 5,618,718		864,873 2,255,866	4,494,599 13,431,620	5,359,472 15,687,486		5,359,472 15,687,486
12		07/01/03 - 09/30/03						275	46,309	49.166	95,476	2	95,476
12A	Enhanced SD/MC (Children) Cost	10/01/03 - 06/30/04							281,529	77,024	358,554		358,554
13	Enhanced SD/MC (Children) SMA	07/01/03 - 09/30/03							46,232	46,827	93,059		93,059
13A 14	<del></del>	10/01/03 - 06/30/04 07/01/03 - 09/30/03							281,061 54,248	73,315 54,810	354,375 109,059		354,375 109,059
14A	Enhanced SD/MC (Children) P. C.	10/01/03 - 06/30/04							329,794	85,866	415,660		415,660
15	Enhanced SD/MC (Children) N. R.	07/01/03 - 09/30/03											
15A		10/01/03 - 06/30/04					ozanie i						<u></u>
16 16A	Enhanced SD/MC (Children) Gross Reim	07/01/03 - 09/30/03 10/01/03 - 06/30/04							46,232 281,061	46,827 73,315	93,059 354,375		93,059 354,375
17	Enhanced SD/MC (Refugees) Cost	07/01/03 - 06/30/04					<del></del>		201,001		334,373	· · · · · · <u>· ·</u> · · · · · · · · ·	334,373
18	Enhanced SD/MC (Refugees) SMA	07/01/03 - 06/30/04					+			-			
19	Enhanced SD/MC (Refugees) P. C.	07/01/03 - 06/30/04											
20	Enhanced SD/MC (Refugees) N. R.	07/01/03 - 06/30/04					********		and the second		<u></u>		tananan <u>a.</u> arananan
21	Total Medi-Cal Gross Reimbursement (Excludes Refugees)	07/01/03 - 09/30/03 10/01/03 - 06/30/04					1,575,239		911,105	4,541,426	5,452,531		5,452,531
21A 22	Enhanced SD/MC (Refugees) Gross Reim.	07/01/03 - 06/30/04					5,618,718		2,536,927	13,504,935	16,041,862		<u>16,041,862</u>
23		07/01/03 - 09/30/03					71.71.71.71.71.71.71.71.71.71.71.71.71.7		**********	98,598	98,598	*********	98,598
23A	Healthy Families Cost	10/01/03 - 06/30/04								200,712	200,712		200,712
24	Healthy Families SMA	07/01/03 - 09/30/03								93,973	93,973		93,973
24A 25	U-W F-T- DO	10/01/03 - 06/30/04 07/01/03 - 09/30/03				1				191,257 109,916	191,257 109,916		191,257 109,916
25A	Healthy Families P. C.	10/01/03 - 06/30/04								223,752	223,752		223,752
26 26A	Healthy Families N. R.	07/01/03 - 09/30/03 10/01/03 - 06/30/04											
:::1	<u> </u>						anner and a	10227111111	eranganan)		400000000000000000000000000000000000000		-वद्यवस्य हुन्।
27 27A	Healthy Families Gross Reim.	07/01/03 - 09/30/03 10/01/03 - 06/30/04						+		93,973	93,973 191,257		93,973
	Less: Patient and Other Payor Revenue									101,431	101,201		151,437
8		07/01/03 - 09/30/03					141,911		7,004	9,534	16,538		16,538
28A 29	Enhanced SD/MC (Children) Revenue	10/01/03 - 06/30/04					1,555,111	+	18,163	32,402	50,565		50,565
30	Enhanced SD/MC (Refugees) Revenue											+	
1	Healthy Families Revenue												
32	Total Expenditures from MAA (Mode 55)		98,156	353,593	445,980	897,729							
3 4	Medi-Cal Eligibility Factor (Average) Revenue - MAA			59.5	1%								
	**************************************	07/04/02 00/20/02		240	205 222	F70 000				4 634 655	5 405 000		
5A I	THE DUC - SDIMIC TO DIRECT SETVICES	07/01/03 - 09/30/03 10/01/03 - 06/30/04	98,156	210,414	265,392	573,962	1,433,328 4,063,607		904,101 2,518,764	4,531,892 13,472,533	5,435,993 15,991,297		5,435,993 15,991,297
6	Net Due - Enhanced SD/MC (Refugees)						.,,						
7 7A	Net Due - Healthy Families	07/01/03 - 09/30/03 10/01/03 - 06/30/04						<del></del>		93,973	93,973		93,973
	atanan da tatan kanala melangkan da melangkan Pi <del>lita</del> kanala da Pilita k	1010 1/03 - 00130/04					<del>caracterial</del> a			191,257	191,257	<del>zacona l</del>	191,257
8	Amount Negotiated Rates Exceed Costs	07/01/03 - 09/30/03											
8A	SD/MC (Includes Cinidrell)	10/01/03 - 06/30/04											
9	Enhanced SD/MC (Refugees)												
0 0A		07/01/03 - 09/30/03 10/01/03 - 06/30/04						+	+		<del></del>		

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#### CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DETAIL COST REPORT

FISCAL YEAR 2003 - 2004

DEPARTMENT OF MENTAL HEALTH

SD/MC PRELIMINARY DESK SETTLEMENT MH 1979 (08/04)

County: CONTRA COSTA COUNTY
County Code: 07

	Legal Entity: CONTRA COSTA COUNTY		A	В	С	D	E	F	G	Н	1 1	J
Lega	al Entity Number: 00007		Total MAA	Total Inpatient	Total Outpatient	Total	50.00% FFP	54.35% FFP	52.95% FFP	<sup>1</sup> Variable % FFP	75.00% FFP	Total FFP
	SD/MC Administrative Reimbursement (County											
1	County SD/MC Direct Service Gross Reimburse			7,193,956	21,494,392	28,688,349						
2	Contract Providers Medi-Cal Direct Service Gro			1,531,600	20,157,183	21,688,783						
3	Total Medi-Cal Direct Service Gross Reimburse	ment				50,377,132						
4	Medi-Cal Administrative Reimbursement Limit					7,556,570						
5	Medi-Cal Administration					7,478,316						
6	Medi-Cal Administrative Reimbursement					7,478,316	3,739,158					3,739,158
	Healthy Families Administrative Reimbursement	t (County Only)										
7	County Healthy Families Direct Service Gross R	eimbursement			285,230	285,230						
7A	Contract Providers Healthy Families Direct Serv	ice Gross Reim.			287,075	287,075						
7B	Total Healthy Families Direct Service Gross Rei	mbursement				572,305						
8	Healthy Families Administrative Reimbursement	Limit				57,231						
9	Healthy Families Administration					66,046						
10	Healthy Families Administrative Reimbursement					57,231				37,200		37,200
1000000	SD/MC Net Reimbursement for MAA	<u> </u>										
	Medi-Cal Admin. Activities Svc Functions 01 - 09	9	98.156			98,156	49,078					49,078
	Medi-Cal Admin. Activities Svc Functions 11 - 19		210,414			210,414	105,207					105,207
13	Medi-Cal Admin. Activities Svc Functions 21 - 29	9 (County Only)	265,392			265,392					199,044	199,044
14	Utilization Review-Skilled Prof. Med. Personnel (	County Only)				140.652					105,489	105,489
	Other SD/MC Utilization Review (County Only)	outing orage				932,925	466,463					466,463
141414141		07/04/02 00/20/02		1 477 220	5 242 024	4 224 241		2 (02 000				3,682,898
16 16A	SD/MC Net Reimbursement for Direct Services	07/01/03 - 09/30/03 10/01/03 - 06/30/04		1,433,328	5,342,934 15,636,921	6,776,261 19,700,528		3,682,898	10,431,429			10,431,429
		07/01/03 - 09/30/03		4,063,607	93,059	93,059			10,431,429	60,488		60,488
17 17A	Enhanced SD/MC Net Reimb. (Children)	10/01/03 - 06/30/04		<del> </del>	354,375	354,375				230.344		230,344
18	Enhanced SD/MC Net Reimb. (Refugees)	10/01/03 - 06/30/04			334,373	334,373				230,344		230,344
		200000000000000000000000000000000000000		121500000000	ananangana					100000000000000000000000000000000000000		4344444444444
19	Total SD/MC Reimbursement Before Excess FF											19,069,598
	Amount Negotiated Rates Exceed Costs - SD/M	C & Enh. SD/MC										
	Total SD/MC Reimbursement (FFP)											19,069,598
	Contract Limitation Adjustment											
23	Adjusted Total SD/MC Reimbursement (FFP)											19,069,598
24	III International Control of the	07/01/03 - 09/30/03			93,973	93,973				61,082		61,082
24A	Healthy Families Net Reimbursement	10/01/03 - 06/30/04			191,257	191,257				124,317		124,317
	Total Healthy Families Reimbursement Before E											222,599
	Amount Negotiated Rates Exceed Costs - Health											
27	Total Healthy Families Reimbursement											222,599

#### DEPARTMENT OF MENTAL HEALTH

#### CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY CALCULATION OF SHORT-DOYLE/MEDI-CAL FOR FY 2003 - 2004 HOSPITAL ADMINISTRATIVE DAYS MH 1991 (08/04)

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FISCAL YEAR 2003 - 2004

COUNTY NAME: CONTRA COSTA COUNTY COUNTY CODE: 07		LEGAL ENTITY			NAME: CONTRA COSTA COUNTY  NUMBER: 00007			
Settlement Group	PROVIDER NUMBER	SMA RATE	PERIOD OF SERVICE	ADMIN DAYS	SUBTOTAL AMOUNT	PHYSICIAN COSTS	ANCILLARY COSTS	TOTAL AMOUNT
SD/MC		\$236.38	07/01/03 - 07/31/03	67	\$ 15,837		\$13,636	\$29,473
		\$236.82	08/01/03 - 09/30/03	198	\$ 46,890		\$40,297	\$87,187
		\$236.82	10/01/03 - 12/31/03	877	\$ 207,691		\$178, <b>4</b> 87	\$386,178
		\$236.82	01/01/04 - 06/30/04					
		A AND SOLVER		<u> </u>			Sub Total:	\$ 502,839
Children EMC	ļ	\$236.38	07/01/03 - 07/31/03					
		\$236.82	08/01/03 - 09/30/03					
		\$236.82	10/01/03 - 12/31/03					
		\$236.82	01/01/04 - 06/30/04					
最高,在自然数据的数据数据,他的数据数据的更多数数据。 [1]	- 12.1.2.2.2.2.3.3.3.3.3.3.3.3.3.3.3.3.3.3	1 1925					Sub Total:	<u> Bernarde (Allendaria) (Allend</u>
Refugees EMC		\$236.38	07/01/03 - 07/31/03					
		\$236.82	08/01/03 - 09/30/03					
		\$236.82	10/01/03 - 12/31/03					
		\$236.82	01/01/04 - 06/30/04					
			a ordered to the first	A. L. Briga, A.			Sub Total:	<u> </u>
Healthy Families	L	\$236.38	07/01/03 - 07/31/03					
		\$236,82	08/01/03 - 09/30/03					
		\$236.82	10/01/03 - 12/31/03					
		\$236.82	01/01/04 - 06/30/04					
		· 对于第111年。		don Table	<u> </u>	18.40年18.10年	Sub Total:	· passing and the
GRAND TOTAL					\$ 270,419		\$ 232,420	\$ 502,839